

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011459

Entity Name: T.S. FOG LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

% NORMAN SOLOMON
606 N RIVERSIDE DR
EDGEWATER, FL 32132

New Principal Place of Business:

606 NORTH RIVERSIDE DRIVE
EDGEWATER, FL 32132 US

Current Mailing Address:

P.O. BOX 248
NEW SMYRNA BEACH, FL 32170

New Mailing Address:

606 NORTH RIVERSIDE DRIVE
EDGEWATER, FL 32132 US

FEI Number: 02-0738246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, ANTHONY
606 N RIVERSIDE DR
Y
EDGEWATER, FL 32132y US

Name and Address of New Registered Agent:

STEVENS, ANTHONY
606 N RIVERSIDE DR
EDGEWATER, FL 32132 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANTHONY STEVENS

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: STEVENS, ANTHONY
Address: 606 NORTH RIVERSIDE DR
City-St-Zip: EDGEWATER, FL 32132

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STEVENS, ANTHONY
Address: 606 NORTH RIVERSIDE DR
City-St-Zip: EDGEWATER, FL 32132 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTHONY STEVENS

MR

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date