

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012132

Entity Name: TCL ONE, LLC

FILED  
Mar 24, 2009  
Secretary of State

**Current Principal Place of Business:**

1161 NORTHLAKE WAY  
PALM BEACH, FL 33480 US

**New Principal Place of Business:**

**Current Mailing Address:**

1161 NORTHLAKE WAY  
PALM BEACH, FL 33480 US

**New Mailing Address:**

FEI Number: 74-3155623

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PATRICIA LEBOW, P.A.  
ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MARIA CRISTINA DE LO, S REYES FANJUL REV. TR  
Address: C/O ONE NORTH CLEMATIS STREET, SUITE 500  
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGRM ( ) Delete  
Name: FANJUL RYAN, MARIA CRISTINA  
Address: C/O ONE NORTH CLEMATIS STREET, SUITE 500  
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGRM ( ) Delete  
Name: FANJUL FERNANDEZ, LILLIAN  
Address: C/O ONE NORTH CLEMATIS STREET, SUITE 500  
City-St-Zip: WEST PALM BEACH, FL 33401 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PATRICIA LEBOW, ESQ., AUTHORIZED REP.

AR

03/24/2009

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