

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012693

Entity Name: TAMPA'S TEAM, LLC

FILED
Apr 13, 2007
Secretary of State

Current Principal Place of Business:

5010 W. KENNEDY BOULEVARD
SUITE 200
TAMPA, FL 33609 US

New Principal Place of Business:

201 E. KENNEDY BLVD.
SUITE 1111
TAMPA, FL 33602 US

Current Mailing Address:

5010 W. KENNEDY BOULEVARD
SUITE 200
TAMPA, FL 33609 US

New Mailing Address:

201 E. KENNEDY BLVD.
SUITE 1111
TAMPA, FL 33602 US

FEI Number: 20-2339303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARD, DAVID T
5010 W. KENNEDY BOULEVARD
SUITE 200
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

WARD, DAVID T
201 E. KENNEDY BLVD.
SUITE 1111
TAMPA, FL 33602 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: DAVID T. WARD

04/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WARD, DAVID T
Address: 806 S. FREMONT AVENUE
City-St-Zip: TAMPA, FL 33606 US

Title: MGRM () Delete
Name: WARD, SUSAN C
Address: 806 S. FREMONT AVENUE
City-St-Zip: TAMPA, FL 33606 US

ADDITIONS/CHANGES:

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 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: DAVID T. WARD

MGRM

04/13/2007

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