2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000014536

1. Entity Name
TI PHOENIX, LLC



FILED Feb 26, 2007 08:00 AN Secretary of State

Principal Place of Business

C/O JOHN D. MACASKILL 1416 CEDAR BAY LANE SARASOTA, FL 34231 Mailing Address

C/O JOHN D. MACASKILL 1416 CEDAR BAY LANE SARASOTA, FL 34231



01122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number			Applied For
20-2366528			Not Applicable
5. Certificate of Status Desired	X	\$5.00	Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

MORAN, JOHN A 1990 MAIN STREET SUITE 700 SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept	
the obligations of registered agent.	
NATURE	

(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MACASKILL, JOHN 1416 CEDAR BAY LANE SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

09/07/07-800**49**-017-59:00

DATE

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

120/07 350-8872

Dete

Daytime Phone #