2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 25, 2008 8:00 am Secretary of State 04-25-2008 90023 010 ***138.75 DOCUMENT # L05000015595 1. Entity Name TDL, LLC 60028791 Principal Place of Business Mailing Address 2364 TYRONE WAY ATTN: TONY LOLLY 12226 UNIVERSITY MALL 33710 TAMPA, FL 33612 TAMPA, FL 33612 CR2E083 (12/07) 02192008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FELNumber 20-2289476 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent LOLLY, TONY D DO NOT WRITE 12902 CINNIMON PLACE TAMPA, FL 33612 IN THIS SPACE 8. 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE LOLLY, TONY D 12902 CINNIMON PLACE STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33624 NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, 1 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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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