

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032192

Entity Name: TEAM PARTNERS LLC

FILED
Jul 08, 2007
Secretary of State

Current Principal Place of Business:

4333 HIGEL AVE.
SARASOTA, FL 34242

New Principal Place of Business:

2226 GROVE ST
SARASOTA, FL 34239 US

Current Mailing Address:

4333 HIGEL AVE.
SARASOTA, FL 34242

New Mailing Address:

2226 GROVE ST
SARASOTA, FL 34239 US

FEI Number: 72-1596743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STEPHENS, JOSEPH
11306 BLUE SAGE PLACE
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

STEPHENS, JOSEPH
2226 GROVE ST
SARASOTA, FL 34239 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: JOSEPH STEPHENS

07/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STEPHENS, JOSEPH
Address: 11306 BLUE SAGE PLACE
City-St-Zip: BRADENTON, FL 34202

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STEPHENS, JOSEPH
Address: 2226 GROVE
City-St-Zip: SARASOTA, FL 34239

Title: MGRM () Change (X) Addition
Name: PAULINE, TOTTEN
Address: 2226 GROVE ST
City-St-Zip: SARASOTA, FL 34239

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: JOSEPH STEPHENS

MGRM

07/08/2007

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