

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038942

Entity Name: TTB PROPERTIES LLC

FILED
Jan 12, 2007
Secretary of State

Current Principal Place of Business:

8900 S. HWY 17-92
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

8900 S. HWY 17-92
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 20-2848125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THURSTON, RICHARD
8900 S. HWY 17-92
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

THURSTON, RICHARD K MGRM
8900 S. HWY 17-92
MAITLAND, FL 32751 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: RICHARD K THURSTON

01/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THURSTON, RICHARD K
Address: 17520 COBBLESTONE LANE
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: THURSTON, RONALD J
Address: 342 KENTUCKY BLUE CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: MGRM () Delete
Name: BECOREST, BRADFORD P
Address: 16410 BAYRIDGE DR.
City-St-Zip: CLERMONT, FL 34711

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 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: RICHARD K THURSTON

MGRM

01/12/2007

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