

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000040506

1. Entity Name
T-VILLAGE 101, LLC



Principal Place of Business
18851 NE 29TH AVE
SUITE 1011
AVENTURA, FL 33180

Mailing Address
18851 NE 29TH AVE
SUITE 1011
AVENTURA, FL 33180

FILED
May 01, 2008 08:00 AM
Secretary of State



04302008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2746431	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DADE COUNTY CORPORATE AGENTS, INC.
18901 N.E. 29TH AVENUE
SUITE 100
AVENTURA, FL 33180

**DO NOT WRITE
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 retreating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U00000839003
05/28/08-80009-016 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CSGB HOLDINGS, LLC 18851 NORTHEAST 29TH AVENUE SUITE 1 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**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

04/30/08

Date

(305) 935-5250

Daytime Phone #