

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044036

Entity Name: TACTIC, LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

1779 N. UNIVERSITY DRIVE #202
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

1779 N. UNIVERSITY DRIVE #202
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 20-3180618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVES, BJ
1779 N. UNIVERSITY DRIVE #202
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RIVIERE, JEAN
Address: 2613 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGRM () Delete
Name: REEVES, BJ
Address: 1779 N. UNIVERSITY DRIVE #202
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CONSALVO, MARLENE
Address: 1779 N. UNIVERSITY DRIVE #202
City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: B.J. REEVES

MGRM

04/17/2009

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