## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000044234

10156 US 90 E

LIVE OAK, FL 32060 US

Address:

City-St-Zip:

Entity Name: TIN MAN, LLC

FILED Feb 26, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10156 US 90 E LIVE OAK, FL 32060 US **Current Mailing Address: New Mailing Address:** 10156 US 90 E LIVE OAK, FL 32060 US FEI Number: 83-0470465 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOUCHTON, SARAH S 5808 CR 249 LIVE OAK, FL 32060 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM ( ) Delete Title: () Change () Addition TOUCHTON, SARAH S Name: Name: 10156 US 90 E Address: Address: City-St-Zip: LIVE OAK, FL 32060 US City-St-Zip: ( ) Delete Title: MGRM Title: () Change () Addition Name: TOUCHTON, JAN R Name: Address: 10156 US 90 E Address: City-St-Zip: LIVE OAK, FL 32060 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition JERNIGAN, JANUARY S Name: Name: Address: 119 JOHN ST Address: City-St-Zip: LIVE OAK, FL 32064 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: TOUCHTON, SARA B Name: Address: 819 TARA TRACE CIRCLE Address: City-St-Zip: LIVE OAK, FL 32064 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition TOUCHTON, REBECCA A Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: SARAH S. TOUCHTON MGRM 02/26/2007