2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000093382

1. Entity Name

T.I. 105TH STREET, LLC



Principal Place of Business

Mailing Address

24500 CHAGRIN BOULEVARD, #200 BEACHWOOD, OH 44122

24500 CHAGRIN BOULEVARD, #200 BEACHWOOD, OH 44122 FILED Jan 22, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

SIGNATURE AND THEO OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

01112008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
NOT APPLICABLE

Applied For Not Applicable

216-464-5130

Daytime Phone #

5. Certificate of Status Desired

Robert G. Risman, Manager 1/15/08

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.			
SIGNATURE.		101	DATE
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
Arter may 1, 2006 Fee will be \$556.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	RISMAN, ROBERT G		•
STREET ADDRESS	24500 CHAGRIN BOULEVARD, #200	•	I
CITY-ST-ZIP	BEACHWOOD, OH 44122		
TITLE			
NAME			U00000790890
STREET ADDRESS			01/23/08-80051-021 138.75
CITY-ST-ZIP			
TITLE		i	
NAME			'
STREET ADDRESS			NOT WRITE
CITY-ST-ZIP			
THTLE		I IN 7	THIS SPACE
NAME		1	
STREET ADDRESS			
CITY+ST-ZIP			
TITLE			
NAME			
STREET ADDRESS CITY-ST-ZIP			
CITY-SI-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP		l	
11. I hereby certify that the information expelled with this fitting 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 deliver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

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