

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000097253

**FILED**  
**May 04, 2011**  
**Secretary of State**

**Entity Name:** TLSM INVESTMENTS, LLC

**Current Principal Place of Business:**

1795 N BROADWAY  
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6516  
LAKELAND, FL 33807

**New Mailing Address:**

**FEI Number:** 20-3585158

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STEVE, MICHALEC  
180 S BROADWAY  
BARTOW, FL 33830 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  
Name: MICHALEC, STEVE  
Address: PO BOX 6516  
City-St-Zip: LAKELAND, FL 33807

Title: MGRM  
Name: MICHALEC, MENDY  
Address: PO BOX 6516  
City-St-Zip: LAKELAND, FL 33807

Title: MGRM  
Name: MACDONALD, TROY  
Address: 918 SHAGOS DR  
City-St-Zip: APOLLO BEACH, FL 33572

Title: MGRM  
Name: MACDONALD, LINDA  
Address: 918 SHAGOS DR  
City-St-Zip: APOLLO BEACH, FL 33572

I hereby 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: TROY MACDONALD

MGRM

05/04/2011

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