


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2008 8:00 am
Secretary of State

01-07-2008 90048 025 ***143.75

DOCUMENT # L05000105283	
1. Entity Name TOMBLEY, LLC	

Principal Place of Business 2555 N.E. 49TH STREET OCALA, FL 34479	Mailing Address 2555 N.E. 49TH STREET OCALA, FL 34479
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2. Principal Place of Business - No P.O. Box # 2791 N.E. 66 th STREET Suite, Apt. #, etc.	3. Mailing Address 2791 N.E. 66 th STREET Suite, Apt. #, etc.
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City & State OCALA, FLORIDA	City & State OCALA, FLORIDA
Zip 34479	Country MARION



01042008 Chg-LLC CR2E083 (12/06)

4. FEI Number 86-1157186	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent TOMBLEY, CAROL 2555 N.E. 49TH STREET OCALA, FL 34479	7. Name and Address of New Registered Agent Name TOMBLEY CAROL Street Address (P.O. Box Number is Not Acceptable) 2791 N.E. 66 th STREET City OCALA FL Zip Code 34479
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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 Carol A. Tombley CAROL A. TOMBLEY 1-6-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TOMBLEY, CAROL 2555 NE 49TH STREET OCALA, FL 34479 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TOMBLEY, CAROL 2791 N.E. 66 th STREET OCALA, FL 34479 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOMBLEY, RONALD E 2555 NE 49TH STREET OCALA, FL 34479 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOMBLEY, RONALD E 2791 N.E. 66 th STREET OCALA, FL 34479 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Carol A. Tombley CAROL A. TOMBLEY 1/6/08 352-629-4745
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #