2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000107975

1. Entity Name

Principal Place of Business

282 SW DINKINS STREET MADISON, FL 32340

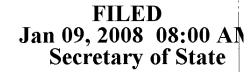
T & K PROPERTIES OF MADISON, LLC



Mailing Address

POST OFFICE BOX 507 MADISON, FL 32341

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





DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 02-0758151 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daylime Phone #

6. Name and Address of Current Registered Agent

GORDON, KEITH A 491 SW RANGE AVE MADISON, FL 32340

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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			
	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			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GORDON, SIDNEY T 491 SW RANGE AVE MADISON, FL 32340		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		
NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby o	certify that the information supplied with this filing does not q on this report is true and accurate and that my signature shi	ualify for the exemptions contained in Chapter 11 all bave the same legal effect as if made under or	9. Florida Statutes. I further certify that the information ath; that I am a managing member or manager of the