


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 14, 2007 8:00 am
Secretary of State

01-18-2007 90015 024 ****55.00

DOCUMENT # L05000109913	
1. Entity Name TOMANJON, LLC	

Principal Place of Business 1887 MILLER LANDING ROAD TALLAHASSEE, FL 32312	Mailing Address 1887 MILLER LANDING ROAD TALLAHASSEE, FL 32312
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01112007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-4306620	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent	
PIERCE, ROBERT A 1887 MILLER LANDING ROAD P.O. Box 32301 TALLAHASSEE, FL 32312 32301 827 S. Calhoun St	

**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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BIANCO, CHARLES C 1887 MILLER LANDING ROAD TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BIANCO, LINDA F 1887 MILLER LANDING ROAD TALLAHASSEE, FL 32312
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**DO NOT WRITE
IN THIS SPACE**

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: Charles C. Bianco Charles C. Bianco 1/16/07 431-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone # 852-5626