2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000116745

1. Entity Name TIME & TIME AGAIN LLC

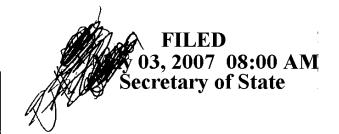


Principal Place of Business

6439 CENTRAL AVENUE ST. PETERSBURG, FL 33710--841 US Mailing Address

6439 CENTRAL AVENUE ST. PETERSBURG, FL 33710

US





05012007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	20-3910721

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMONE, STEPHEN 6439 CENTRAL AVENUE ST. PETERSBURG, FL, FL 33710

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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			
Filing Fee is \$50.00					

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

9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	SIMONE, JOAN K			
STREET ADDRESS	6439 CENTRAL AVENUE			
CITY-ST-ZIP	ST. PETERSBURG, FL 33710			
TITLE	MGRM			
NAME	SIMONE, STEPHEN			
STREET ADDRESS	6439 CENTRAL AVENUE			
CITY-ST-ZIP	ST. PETERSBURG, FL 33710			
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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:

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

04/30/200

127-341-0272

Daylime Phone #