

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003497

Entity Name: T3 MANAGEMENT, LLC

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

3907 RAMBLING ACRES DR.
TITUSVILLE, FL 32796 US

New Principal Place of Business:

3206 S. HOPKINS AVE
SUITE #19
TITUSVILLE, FL 32780 US

Current Mailing Address:

3907 RAMBLING ACRES DR.
TITUSVILLE, FL 32796 US

New Mailing Address:

3206 S. HOPKINS AVE
SUITE #19
TITUSVILLE, FL 32780 US

FEI Number: 33-1130105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: SCHRUMPF, TERRY
Address: 3907 RAMBLING ACRES DR
City-St-Zip: TITUSVILLE, FL 32796 US

Title: D () Delete
Name: SCHRUMPF, TANYA
Address: 3907 RAMBLING ACRES DR
City-St-Zip: TITUSVILLE, FL 32796 US

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: SCHRUMPF, TERRY
Address: 3206 S. HOPKINS AVE, SUITE #19
City-St-Zip: TITUSVILLE, FL 32780 US

Title: VP (X) Change () Addition
Name: SCHRUMPF, TANYA
Address: 3206 S. HOPKINS AVE, SUITE 19
City-St-Zip: TITUSVILLE, FL 32780 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: TERRY SCHRUMPF

CEO

04/26/2007

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