#### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L06000016750

1. Entity Name

TUCKERS GRADE ASSOCIATES, LLC



Principal Place of Business

1074 N. ORANGE AVENUE SARASOTA, FL 34236 US Mailing Address

1074 N. ORANGE AVENUE SARASOTA, FL 34236 US

# FILED Jan 14, 2008 8:00 am Secretary of State

01-14-2008 90048 010 \*\*\*138.75

### DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC CI

CR2E083 (12/07)

4. FEI Number 20–4318117

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

GATES, CHAD L 1074 N. ORANGE AVENUE SARASOTA, FL 34236

## 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		1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GATES, CHAD L 1074 N. ORANGE AVENUE SARASOTA, FL 34236		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS S	SPACE ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			1
11. I hereby indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature s ibility company or the receiver or trustee empowered to exe	qualify for the exemptions contained in Chapter 119, Florida Statul shall have the same legal effect as if made under oath; that I am a ecute this report as required by Chapter 608, Florida Statutes.	es. I further certify that the information managing member or manager of the

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