2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025528

City-St-Zip:

PINECREST, FL 33156

Entity Name: TALL VENTURES PARTNERSHIP LLC

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6370 SW 102 ST PINECREST, FL 33156 **Current Mailing Address: New Mailing Address:** 6370 SW 102 ST PINECREST, FL 33156 FEI Number: 59-3836506 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JENSEN, ROBERT W 2199 PONCE DE LEON BLVD SUITE 301 CORAL GABLES, FL 33134 US 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete SCHAEFER, PAMELA L Name: Name: Address: 6370 SW 102 STREET Address: PINECREST, FL 33156 City-St-Zip: City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: SCHAEFER, JOHN H JR Name: Address: 6370 SW 102 STREET Address: City-St-Zip: PINECREST, FL 33156 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition JOHN H SCHÄEFER RTA UA 7-9-2003 Name: Name: Address: 6370 SW 102 STREET Address:

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.

City-St-Zip:

SIGNATURE: JOHN H SCHAEFER MGR 04/10/2009