

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000044297

Entity Name: T & D UNLIMITED LLC

**FILED**  
**Mar 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

255 AYERS CT.  
TALLAHASSEE, FL 32305

**New Principal Place of Business:**

**Current Mailing Address:**

255 AYERS CT.  
TALLAHASSEE, FL 32305

**New Mailing Address:**

FEI Number: 20-4776304

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TRAN, LISA  
255 AYERS CT.  
TALLAHASSEE, FL 32305 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: MGRM  
Name: TRAN, LISA  
Address: 255 AYERS CT.  
City-St-Zip: TALLAHASSEE, FL 32305

Title: MGRM  
Name: TRAN, DAVID  
Address: 255 AYERS CT.  
City-St-Zip: TALLAHASSEE, FL 32305

Title: MGRM  
Name: TRAN, SAMANTHA  
Address: 255 AYERS CT.  
City-St-Zip: TALLAHASSEE, FL 32305

Title: MGRM  
Name: NGYEN, HAI  
Address: 255 AYERS CT.  
City-St-Zip: TALLAHASSEE, FL 32305

I hereby 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: LISA TRAN

MGR

03/07/2011

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