


2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT # L06000089808					
1. Entity Name TAP OF POLK COUNTY, LLC					
Principal Place of Business 1300 THIRD STREET SW WINTER HAVEN, FL 33880 US			Mailing Address P.O. BOX 549 EAGLE LAKE, FL 33839-0549 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		09052007 Chg-LLC CR2E083 (12/06)	
Zip		Country		4. FEI Number 20-5426483	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
			Name <u>Richard J Conti</u> Street Address (P.O. Box Number is Not Acceptable) <u>216 E McLeod Rd</u> City <u>Eagle Lake</u> <u>FL</u> Zip Code <u>33839</u>		
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 <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE <u>9/10/07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Amended AR is \$50.00			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONTI, RICHARD J 216 E. MCLEOD ROAD EAGLE LAKE, FL 33839	<input type="checkbox"/> Delete			
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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 <u>[Signature]</u> DATE <u>9/10/07</u> Daytime Phone # _____		