

FILED
Jul 18, 2008 8:00 am
Secretary of State

04-28-2008 90055 017 ****50.00
07-18-2008 90050 001 ****88.75

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L06000098458

1. Entity Name
TKM ENTERPRISES, LLC



Principal Place of Business
**13635 LEGENDS WALK TERRACE
BRADENTON, FL 34202 US**

Mailing Address
**13635 LEGENDS WALK TERRACE
BRADENTON, FL 34202 US**

50008550



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04232007 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOLAHAN, MICHAEL P
13635 LEGENDS WALK TERRACE
BRADENTON, FL 34202**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 re-registering)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|---|---------------------------------|--|---|
| MGRM HOLAHAN, MICHAEL P 13635 LEGENDS WALK TERRACE BRADENTON, FL 34202 | <input type="checkbox"/> | | |
| | <input type="checkbox"/> | | |
| | <input type="checkbox"/> | | |
| | <input type="checkbox"/> | | |
| | <input type="checkbox"/> | | |
| | <input type="checkbox"/> | | |
| | <input type="checkbox"/> | | |

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/11/08
Date

Daytime Phone #

ATTACHMENT
50008550

Sign Off

Search Locations Mail Help

| Accounts | Bill Pay | Transfers | Business Tools | Investments | Payroll | Customer Service |
|----------|----------|-----------|----------------|-------------|---------|------------------|
| Overview | Payments | | | | | |

Payments Overview • Automatic Payments • Make a Single Payment

View Payment

Quick Help

Use this page to view the details of a payment you've made. After a payment is processed, we provide a summary of how the payment was sent (electronically or by mail), when the funds were withdrawn from your account, a payment memo and whether it was sent with the payment, and when the payment was delivered to the payee.

What can I do?

- Inquire about a payment (How?)

What do I need to know?

- After the payment's status changes from Scheduled to In Process or Processed, the payment can no longer be edited or canceled and the payment memo cannot be edited.
- For any problems with this payment, you can send us a message by clicking **Inquire About Payment**. Inquiries are only available for payments with a status of Processed or Failed.
- **Pay From** is the account from which the funds are withdrawn to make the payment.
- **Deliver By** is the date we delivered the payment to your payee.
- If this is a recurring payment plan, click **View payment plan details** to see details of your recurring payment plan, including the next scheduled payment and recently processed payments.

What else can I do? (show)

If you have questions, browse our list of frequently asked questions.

Pay From: BUSINESS ECONOMY CHECKING-0708

| Payee | Amount | Deliver By | Confirmation Number |
|---|---------|------------|---------------------|
| Florida Department of State L06000098458 | \$88.75 | 06/04/2008 | 7SH56-Y7F85 |

Check # 5004 from your BUSINESS ECONOMY CHECKING-0708 account was mailed to Florida Department of State on 05/30/2008. Funds for this payment are withdrawn from your account when the payee cashes the check.

If you have a question about this payment, click **Inquire About Payment** to send a message to customer service.

[Inquire About Payment](#) [Return to Previous Page](#)

ATTACHMENT

Division of Corporations

50008550
L06000098458

I have included the banking transaction whereby i attempted to pay the difference of \$88.75 on May 28th.....it seems that this check was lost in the mail so I am subsequently paying the difference at this time.

Michael Holohan

Division of Corp?
PO Box 6478
Tallahassee, FL 32314