

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000103326

Entity Name: TCB PLUMBING, LLC

FILED  
Jan 24, 2009  
Secretary of State

**Current Principal Place of Business:**

207 EAST 3RD STREET  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

619 HIGHWAY 2297  
PANAMA CITY, FL 32404

**Current Mailing Address:**

5112 KENDRICK ST.  
PARKER, FL 32404

**New Mailing Address:**

FEI Number: 20-5798373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OST, JESSE  
619 HWY 2297  
PANAMA CITY, FL 32404 US

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

OST, JESSE  
5112 KENDRICK ST.  
PANAMA CITY, FL 32404 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:

01/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: OST, JESSE  
Address: 5112 KENRICK STREET  
City-St-Zip: PARKER, FL 32404

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: OST, JESSE  
Address: 5112 KENDRICK STREET  
City-St-Zip: PARKER, FL 32404

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.

SIGNATURE: JESSE OST

MGRM

01/24/2009

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