

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000111097

FILED
Jan 03, 2008
Secretary of State

Entity Name: TANK CARE LLC

Current Principal Place of Business:

5555 ASHTON LAKE DRIVE
SARASOTA, FL 34231

New Principal Place of Business:

5571 ASHTON LAKE DRIVE
SARASOTA, FL 34231

Current Mailing Address:

5555 ASHTON LAKE DRIVE
SARASOTA, FL 34231

New Mailing Address:

5571 ASHTON LAKE DRIVE
SARASOTA, FL 34231

FEI Number: 20-5928770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, JENNA B
5555 ASHTON LAKE DRIVE
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

MCCOY, JENNA B
5571 ASHTON LAKE DRIVE
SARASOTA, FL 34231 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: JENNA B. MCCOY

01/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CARTER, JENNA B
Address: 5555 ASHTON LAKE DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: MGRM () Delete
Name: MCCOY, COREY
Address: 5555 ASHTON LAKE DRIVE
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCCOY, JENNA B
Address: 5571 ASHTON LAKE DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: MGRM (X) Change () Addition
Name: MCCOY, COREY
Address: 5571 ASHTON LAKE DRIVE
City-St-Zip: SARASOTA, FL 34231

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: JENNA B. MCCOY

MGRM

01/03/2008

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