

FILED
Sep 06, 2007 8:00 am
Secretary of State

07-16-2007 90042 011 ****50.00

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L06000122371

1. Entity Name
TIOGA REALTY LLC



Principal Place of Business
105 SW 128TH STREET
TIOGA, SUITE 200
NEWBERRY, FL 32669

Mailing Address
P.O. BOX 13451
GAINESVILLE, FL 32604

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07062007

Chg LLC

Memo: FET#

CR2E083

(12/08)

Doc. #

4. FEI Number

20-8102334

Applied For

Not Applicable

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

DIAZ, LUIS A
105 SW 128TH STREET
TIOGA, SUITE 200
NEWBERRY, FL 32669

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 SEP # (if applicable)

NOTE: Registered Agent signature required when reissuing

DATE

Filing Fee is \$50.00
Due by September 14, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
TOWN OF TIOGA LLC
105 SW 128TH STREET, TIOGA, SUITE 200
NEWBERRY, FL 32669 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
TOWN OF TIOGA LLC
105 SW 128TH STREET, Suite 200
TIOGA, FL 32669 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Manager
Luis Diaz
105 SW 128th Street, Suite 200
TIOGA, FL 32669 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Manager
Deborah Minick
105 SW 128th Street, Suite 200
TIOGA, FL 32669 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 relative of such person empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE:

Luis Diaz Luis Diaz

7-12-07 352-331-6220

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #



ATTACHMENT

30012675

September 4, 2007

Florida Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

RE: Tioga Realty, LLC
L06000122371

To Whom It May Concern:

Please find attached corrected annual report/uniform business report for the above referenced LLC. I have changed Town of Tioga, LLC to a Managing Member.

If you have any questions or need any further information, please call me at (352) 331-7451.

Sincerely,

Kimi Hines
Office Manager