2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L07000013148

Entity Name: TS & COMPANY LLC

Current Principal Place of Business:

5805 NW 37TH STREET
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

5805 NW 37TH STREET
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 68-0644159 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, TERRY D DR.
5805 NW 37TH STREET
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: JONES, SYLVIA R
Address: 5805 NW 37TH STREET
City-St-Zip: GAINESVILLE, FL 32653 US

Title: MGRM ( ) Delete
Name: JONES, TERRY D
Address: 5805 NW 37TH STREET
City-St-Zip: GAINESVILLE, FL 32653 US

Title: MGR ( ) Delete
Name: SAPP, MARVIN W
Address: 5805 NW 37TH STREET
City-St-Zip: GAINESVILLE, FL 32653 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: JONES, TERRY D DR.
Address: 5805 NW 37TH STREET
City-St-Zip: GAINESVILLE, FL 32653 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DR. TERRY D. JONES MGRM 04/30/2008

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