

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000017746

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** TOTAL MANAGEMENT PROVIDERS, LLC

**Current Principal Place of Business:**

2222 PONCE DE LEON BLVD.  
PENTHOUSE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

848 BRICKELL AVENUE  
1010  
MIAMI, FL 33131

**Current Mailing Address:**

2222 PONCE DE LEON BLVD.  
PENTHOUSE  
CORAL GABLES, FL 33134

**New Mailing Address:**

848 BRICKELL AVENUE  
1010  
MIAMI, FL 33131

**FEI Number:** 26-1327579

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TMP TITLE & ESCROW, LLC  
848 BRICKELL AVENUE  
1010  
MIAMI, FL 33131 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:** TMP TITLE & ESCROW,, LLC  
**Address:** 848 BRICKELL AVENUE # 1010  
**City-St-Zip:** MIAMI, FL 33131

**ADDITIONS/CHANGES:**

**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:** TMP TITLE & ESCROW, LLC

MGRM

04/30/2008

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