

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000080473

Entity Name: T & G SALES, LLC

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

11950 SOUTHEAST HIGHWAY 464
OCKLAWAHA, FL 32179 US

New Principal Place of Business:

Current Mailing Address:

11950 SOUTHEAST HIGHWAY 464
OCKLAWAHA, FL 32179 US

New Mailing Address:

FEI Number: 26-0657995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEADE, RALPH G
11950 SOUTHEAST HIGHWAY 464
OCKLAWAHA, FL 32179 US

Name and Address of New Registered Agent:

NICHOLS, TIMOTHY J
11950 SOUTHEAST HIGHWAY 464
OCKLAWAHA, FL 32179 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: TIMOTHY J NICHOLS

01/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MRG () Delete
Name: MEADE, RALPH G
Address: 11950 SOUTHEAST HIGHWAY 464
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: MGRM () Delete
Name: NICHOLS, TIMOTHY J
Address: 11950 SOUTHEAST HIGHWAY 464
City-St-Zip: OCKLAWAHA, FL 32179 US

ADDITIONS/CHANGES:

Title: MRG (X) Change () Addition
Name: NICHOLS, TIMOTHY J
Address: 11950 SOUTHEAST HIGHWAY 464
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: MGRM (X) Change () Addition
Name: MEADE, RALPH G
Address: 11950 SOUTHEAST HIGHWAY 464
City-St-Zip: OCKLAWAHA, FL 32179 US

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: TIMOTHY J NICHOLS

MRG

01/11/2008

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