

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083837

FILED
Mar 10, 2008
Secretary of State

Entity Name: T & B FLORIDA PROPERTIES, LLC

Current Principal Place of Business:

2406 RUTH HENTZ AVE.
PANAMA CITY, FL 32405

New Principal Place of Business:

2406 RUTH HENTZ AVE.
PANAMA CITY, FL 324052258 US

Current Mailing Address:

P.O BOX 15249
PANAMA CITY, FL 32406

New Mailing Address:

P.O BOX 15249
PANAMA CITY, FL 324065249 US

FEI Number: 65-1319583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, DONALD W
2406 RUTH HENTZ AVE.
PANAMA CITY, FL 32405 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: BROCK, ROMMIE
Address: 2639 FEROL LANE
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGRM () Delete
Name: THOMPSON, GARY
Address: 1101 FIRST STREET, #107
City-St-Zip: CORONADO, CA 92118

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROMMIE H. BROCK TRUS, T
Address: 2406 RUTH HENTZ AVE.
City-St-Zip: PANAMA CITY, FL 324065249 US

Title: MGRM (X) Change () Addition
Name: THOMPSON, GARY G
Address: 1101 FIRST STREET, #107
City-St-Zip: CORONADO, CA 92118 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: D. W. COX, PER REP - RHB TRUST

MGRM

03/10/2008

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