2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000085368

Entity Name: THE TIPPING POINT, LLC

FILED Mar 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1020 EAST TROPICAL WAY PLANTATION, FL 33317 **Current Mailing Address: New Mailing Address:** 1020 EAST TROPICAL WAY PLANTATION, FL 33317 FEI Number: 26-0740988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CURY, CHRISTOPHER T 1020 EAST TROPICAL WAY PLANTATION, FL 33317 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: ADDITIONS/CHANGES: Title: () Delete (X) Change () Addition CURY, CHRISTOPHER T CURY, CHRISTOPHER T Name: Name: 1020 EAST TROPICAL WAY Address: 1020 EAST TROPICAL WAY Address: City-St-Zip: PLANTATION, FL 33317 US City-St-Zip: PLANTATION, FL 33317 US Title: MGRM () Delete Title: MGRM (X) Change () Addition MILLER, JAMES E Name: MILLER, JAMES E Name: Address: 6840 VILLAS DRIVE SOUTH Address: 19 HAMPSTEAD AVENUE City-St-Zip: BOCA RATON, FL 33433 US City-St-Zip: BLUFFTON, S. 29910 US Title: MGRM (X) Delete Title: () Change () Addition CURY, PHILLIP H Name: Name: 1220 SPRING BRANCH ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition Name: CURY, NEAL G Name: Address: 1550 NW 101 WAY Address: City-St-Zip: PLANTATION, FL 33322 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition DIAMOND DEVELOPMENT,, INC. Name: Name: 23210 L'ERMITAGE CIRCLE Address: Address: City-St-Zip: BOCA RATON, FL 33433 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition THE ROBERT B. LECCE, REVOCABLE TRUS T Name: Name: Address: P.O. BOX 480-068 Address: DELRAY BEACH, FL 33448 City-St-Zip: 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: CHRISTOPHER T. CURY MGRM 03/09/2009