2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# L07000098196

Entity Name: TCBC, LLC

Current Principal Place of Business:

4301 ANCHOR PLAZA PARKWAY, STE 400
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

4301 ANCHOR PLAZA PARKWAY, STE 400
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 26-1138844 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARTER, CRAIG R
4301 ANCHOR PLAZA PKWY
TAMPA, FL 33634 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: GARVEY, JAMES P
Address: 4301 ANCHOR PLAZA PARKWAY, STE 400
City-St-Zip: TAMPA, FL 33634 US

Title: MGRM ( ) Delete
Name: VARSAMES, LOU
Address: 4301 ANCHOR PLAZA PARKWAY, STE 400
City-St-Zip: TAMPA, FL 33634 US

Title: MGRM ( ) Delete
Name: ROTHSCHILD, DOUG
Address: 4301 ANCHOR PLAZA PARKWAY, STE 400
City-St-Zip: TAMPA, FL 33634 US

Title: MGRM ( ) Delete
Name: LAUER, BRUCE
Address: 4301 ANCHOR PLAZA PARKWAY, STE 400
City-St-Zip: TAMPA, FL 33634 US

Title: MGRM ( ) Delete
Name: TAGGART, JOE
Address: 4301 ANCHOR PLAZA PARKWAY, STE 400
City-St-Zip: TAMPA, FL 33634 US

Title: MGRM ( ) Delete
Name: HARTER, CRAIG
Address: 4301 ANCHOR PLAZA PKWY STE 400
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES:

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

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

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

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

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

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: CRAIG HARTER MGRM 01/20/2009

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