

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000011710

Entity Name: TFU LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

10305 LAKE GROVE DRIVE
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

4105 OLD STATE RD 3 N
MUNCIE, IN 47303

New Mailing Address:

10305 LAKE GROVE DRIVE
ODESSA, FL 33556

FEI Number: 26-1872586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDALL, R A CPA
10305 LAKE GROVE DRIVE
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

WALKER, BETH M
10305 LAKE GROVE DRIVE
ODESSA, FL 33556 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: BETH M. WALKER

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BLACK ROCK BISON LLC,
Address: 4105 OLD STATE RD 3 N
City-St-Zip: MUNCIE, IN 47303

Title: MGR (X) Delete
Name: WALKER, KIM
Address: 10305 LAKE GROVE DRIVE
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WALKER, KIMBERLY R
Address: 10305 LAKE GROVE DRIVE
City-St-Zip: ODESSA, FL 33556

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: KIMBERLY R WALKER

MGRM

03/20/2009

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