2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016239

Entity Name: TIGER TRANSPORTATION, LLC

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1315 HIGHWAY 17-92 W 1315 HIGHWAY 17-92 W HAINES CITY, FL 33844 US

Current Mailing Address: New Mailing Address:

1315 HIGHWAY 17-92 W P O BOX 2045

HAINES CITY, FL 33844 HAINES CITY, FL 33845 US

FEI Number: 26-1839714 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:

WILKINSON, STEVEN D
1315 HIGHWAY 17-92 W
HAINES CITY, FL 33844 US

WILKINSON, STEVEN D
1315 HWY 17-92 WEST
HAINES CITY, FL 33844 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: 02/04/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: WILKINSON, STEVEN D Name: WILKINSON, STEVEN D

 Address:
 1315 HIGHWAY 17-92 W
 Address:
 2104 PENINSULAR DRIVE

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 HAINES CITY, FL 33844

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: LEWIS, MARY ANN Name: LEWIS, MARY ANN

Address: 1315 HIGHWAY 17-92 W Address: 10980 JIM EDWARDS ROAD City-St-Zip: HAINES CITY, FL 33844 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:LEWIS, THOMAS CName:LEWIS, THOMAS CAddress:1315 HIGHWAY 17-92 WAddress:10980 JIM EDWARDS ROADCity-St-Zip:HAINES CITY, FL 33844City-St-Zip:HAINES CITY, FL 33844 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: MARY ANN LEWIS MGRM 02/04/2009