

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016239

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** TIGER TRANSPORTATION, LLC

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2045  
HAINES CITY, FL 33845 US

**New Mailing Address:**

**FEI Number:** 26-1839714

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILKINSON, STEVEN D  
1315 HWY 17-92 WEST  
HAINES CITY, FL 33844 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  
**Name:** WILKINSON, STEVEN D  
**Address:** 2104 PENINSULAR DRIVE  
**City-St-Zip:** HAINES CITY, FL 33844

**Title:** MGRM  
**Name:** LEWIS, MARY ANN  
**Address:** 10980 JIM EDWARDS ROAD  
**City-St-Zip:** HAINES CITY, FL 33844 US

**Title:** MGRM  
**Name:** LEWIS, THOMAS C  
**Address:** 10980 JIM EDWARDS ROAD  
**City-St-Zip:** HAINES CITY, FL 33844 US

I hereby 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

02/16/2011

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