

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000038030

Entity Name: TSOFL LLC

FILED  
Jan 07, 2009  
Secretary of State

**Current Principal Place of Business:**

13433 PROVENCE DR.  
PALM BEACH GARDENS, FL 33410 US

**New Principal Place of Business:**

**Current Mailing Address:**

4521 PGA BLVD, UNIT 329  
PALM BEACH GARDENS, FL 33418 US

**New Mailing Address:**

FEI Number: 90-0359023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LWEIS, JACK  
13433 PROVENCE DR.  
PALM BEACH GARDENS, FL 33410 US

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

LEWIS, JACK  
13433 PROVENCE DR.  
PALM BEACH GARDENS, FL 33410 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: JACK LEWIS

01/07/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LEWIS, JACK  
Address: 5024 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LEWIS, JACK  
Address: 13433 PROVENCE DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: JACK LEWIS

MGR

01/07/2009

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