

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000062679

Entity Name: TNC SW, LLC

**FILED**  
**Apr 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

208 E. CASS STREET  
TAMPA, FL 33602

**New Principal Place of Business:**

8019-A WEST HILLSBOROUGH  
TAMPA, FL 33634

**Current Mailing Address:**

208 E. CASS STREET  
TAMPA, FL 33602

**New Mailing Address:**

FEI Number: 27-0441362

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NORMAN, CHRISTOPHER H ESQ.  
315 S. HYDE PARK AVE.  
HINES NORMAN HINES, PL  
TAMPA, FL 33606 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: P  
Name: KHAN, MASOOD K  
Address: 208 E CASS ST  
City-St-Zip: TAMPA, FL 33602

Title: D  
Name: KHAN, NANCY C  
Address: 208 E CASS ST  
City-St-Zip: TAMPA, FL 33602

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: MASOOD K KHAN

P

04/23/2010

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