

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000121472

Entity Name: TOWER BRIDGE, LLC

**FILED**  
**Jan 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

27 EDWIN LANE  
THOMASTON, CT 06787

**New Principal Place of Business:**

6001 BURLINGTON AVENUE NORTH  
ST. PETERSBURG, FL 33710

**Current Mailing Address:**

6001 BURLINGTON AVENUE NORTH  
ST. PETERSBURG, FL 33710

**New Mailing Address:**

FEI Number: 27-4213101

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRICKE, PATRICIA  
6001 BURLINGTON AVENUE NORTH  
ST. PETERSBURG, FL 33710 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: MS.  
Name: FRICKE, PATRICIA  
Address: 6001 BURLINGTON AVENUE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: MRS.  
Name: KIEFFER, REBECCA  
Address: 37 GIOVANNI DRIVE  
City-St-Zip: PROSPECT, CT 06712

Title: MR.  
Name: STEWART, JAMES  
Address: 16303 MUIRFIELD DRIVE  
City-St-Zip: ODESSA, FL 33556

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: PATRICIA FRICKE

MS.

01/29/2012

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