


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L93000000214 1. Entity Name TAMIAMI MANAGEMENT, L.C.	
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Principal Place of Business 5379 OCEAN BLVD SARASOTA, FL 34242	Mailing Address P.O. BOX 35246 SARASOTA, FL 34278
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DO NOT WRITE IN THIS SPACE



01212007No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-0423080	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HESTER, GORDON
5379 OCEAN BLVD
SARASOTA, FL 34242

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000666569
03/23/07-80074-014 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROBERTI, JEFFREY 5379 OCEAN BLVD SARASOTA, FL 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HESTER, GORDON 5379 OCEAN BLVD SARASOTA, FL 34242
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  3-11-07 941-346-7300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #