

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000603

FILED
May 14, 2006
Secretary of State

Entity Name: TIFFELLO PROPERTIES, L.L.C.

Current Principal Place of Business:

300 NE 20TH ST.
WILTON MANORS, FL 33305

New Principal Place of Business:

Current Mailing Address:

PO BOX 9565
FORT LAUDEDALE, FL 33310

New Mailing Address:

FEI Number: 13-4045023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CAPPELLO, JOHN
300 NE 20 ST.
WILTON MANORS, FL 33305 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CAPPELLO, JOHN A
Address: 300 NE 20TH STREET
City-St-Zip: WILTON MANORS, FL 33305

Title: MGRM () Delete
Name: TIFFAN, PAUL W
Address: 300 NE 20TH STREET
City-St-Zip: WILTON MANORS, FL 33305

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN A CAPPELLO

MGRM

05/14/2006

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