

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000627

FILED
Mar 03, 2009
Secretary of State

Entity Name: TCP OF BOCA, L.L.C.

Current Principal Place of Business:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

21045 COMMERCIAL BLVD.
BOCA RATON, FL 33486

New Mailing Address:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486

FEI Number: 65-0891694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAM K. ISAACSON,
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

ISAACSON, WILLIAM K
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 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: WILLIAM K. ISAACSON

03/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ISAACSON, WILLIAM K
Address: 21045 COMMERCIAL TRAIL
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM () Delete
Name: ISAACSON, PATRICIA L
Address: 21045 COMMERCIAL TRAIL
City-St-Zip: BOCA RATON, FL 33486

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 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: WILLIAM K. ISAACSON

MGRM

03/03/2009

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