2005 LIMITED LIABILITY COMPANY

May 20, 2005 8:00 am Secretary of State **ANNUAL REPORT** 04-27-2005 90042 044 ****55.00 **DOCUMENT # L99000002207** 1. Entity Name T & S PROPERTIES, LLC Principal Place of Business Mailing Address 30006840 1211 B 44TH AVENUE EAST 1211 B 44TH AVENUE EAST BRADENTON, FL 43203 BRADENTON, FL 43203 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (10/03) 02242005 Chg-LLC City & State City & State 4. EEI Number Applied For 31-1648256 Not Applicable 34203 zip34203 Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOERGER, THEODORE G Street Address (P.O. Box Number is Not Acceptable) 1211 44TH AVENUE EAST BRADENTON, FL 43203 Zp Cod 203 BRADENTON 8. The above named entity automits 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 Signature, typed or privided name of regletered against and title if applicable. (NOTE: Registered Agens signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGRM TITLE Delete TITLE BOERGER, THEODORE G PLASE NULE STREET ADDRESS 1211 44TH AVENUE EAST STREET ADDRESS BRADENTON, FL 43203 CITY-ST-ZIP CITY-ST-ZIP BRADENTON MGRM DIE Delete TITLE Change | Addition BOERGER, SUSAN K HALLE **KULK** STREET ADDRESS 1211 44TH AVENUE EAST STREET ADDRESS BRADENTON, FL 43203 CITY-ST-ZIP BRADENTON FL CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZDP TITLE C Design TITLE Change | Applican. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-SI-ZIP MLE D Detete TITLE ☐ Change ☐ Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IITLE C Ociete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY-57.7IP 11. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). 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.

FILED

-21-05

MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURESHOSON