2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED Mar 06, 2008 08:00 Al Secretary of State

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1. Entity Name

TCCT, LIMITED LIABILITY COMPANY



Principal Place of Business

POST OFFICE BOX 640 BOKEELIA, FL 33922 Mailing Address

155 LINCOLN STREET ENGLEWOOD, NJ 07631



01042008No Chg-LLC

CR2E083 (12/07)

201-227-1948

Daytime Phone #

4. FEI Number	 Applied For	
22-3743427	 Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SIPRELLE, DWIGHT D USEPPA ISLAND CLUB 8115 MAIN ST BOKEELIA, FL 33922

SIGNATURE:

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the obligations of registered agent.

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SIGNATURE.	Signature, typed or printed name of registered agent and title il applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE After May	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75			
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11. I hereby certify that the information supplied with this filling 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 hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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