

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001296

FILED
Apr 29, 2009
Secretary of State

Entity Name: TLP GP L.L.C.

Current Principal Place of Business:

437 MADISON AVE
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

437 MADISON AVE
NEW YORK, NY 10022

New Mailing Address:

FEI Number: 13-4116888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: CEO () Delete
Name: ASKEW, RON
Address: 437 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

Title: EVP () Delete
Name: HUDNALL, DAVID
Address: 437 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

Title: EVP () Delete
Name: KAMINKOW, BETH ANN
Address: 437 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

Title: CFO () Delete
Name: CAMPBELL, STEWART
Address: 437 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES:

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

Title: EVPS (X) Change () Addition
Name: HUDNALL, DAVID
Address: 437 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

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: DAVID HUDNALL

EVPS

04/29/2009

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