


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90029 044 ****50.00

DOCUMENT # M04000002904 1. Entity Name TP SEVEN LLC					
Principal Place of Business 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947			Mailing Address 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address 3950 RCA Blvd. Suite, Apt. #, etc. Ste 5000 City & State Palm Beach Gardens, FL Zip 33410		Country USA	
4. FEI Number 20-1368288		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TOWNSEND, P. COLEMAN JR 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOWNSEND, P. COLEMAN JR 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOWNSEND, P. COLEMAN JR 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOWNSEND, P. COLEMAN JR 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOWNSEND, P. COLEMAN JR 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOWNSEND, P. COLEMAN JR 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOWNSEND, P. COLEMAN JR 401 S. DUPONT HIGHWAY GEORGETOWN, DE 19947	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					
SIGNATURE: <i>George C. White</i>		George C. White Vice President		2/04/05 (302) 855-7100	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		Daytime Phone #	

20050107



02022005 Chg-LLC CR2E083 (10/03)