

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002912

FILED
Mar 06, 2009
Secretary of State

Entity Name: TBI OVERSEAS (BOLIVIA) LLC

Current Principal Place of Business:

3222 RED CLEVELAND BOULEVARD
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

3222 RED CLEVELAND BOULEVARD
SANFORD, FL 32773

New Mailing Address:

FEI Number: 20-0509038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, R KEITH
3222 RED CLEVELAND RD
SANFORD, FL 32773 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: SD () Delete
Name: CLIFTON, ROGER C
Address: 3222 RED CLEVELAND BOULEVARD
City-St-Zip: SANFORD, FL 32773

Title: AFTC () Delete
Name: FRITZ, KIMBRA F
Address: 3222 RED CLEVELAND BOULEVARD
City-St-Zip: SANFORD, FL 32773

Title: PD () Delete
Name: GOULDTHORPE, LARRY D
Address: 3222 RED CLEVELAND BOULEVARD
City-St-Zip: SANFORD, FL 32773

Title: CFDT () Delete
Name: ROBINSON, R. KEITH
Address: 3222 RED CLEVELAND BOULEVARD
City-St-Zip: SANFORD, FL 32773

Title: AS () Delete
Name: ACKLEY, DAVID E
Address: 3222 RED CLEVELAND BLVD
City-St-Zip: SANFORD, FL 327736

Title: MGRM () Delete
Name: TBI US OPERATIONS IN, C
Address: 3222 RED CLEVELAND BLVD
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES:

Title: SD (X) Change () Addition
Name: GATEHOUSE, MARY
Address: 3222 RED CLEVELAND BOULEVARD
City-St-Zip: SANFORD, FL 32773

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

Title: () Change () Addition
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Address:
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Title: () Change () Addition
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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: R KEITH ROBINSON

CFDT

03/06/2009

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