

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 12, 2007 08:00 A
Secretary of State

DOCUMENT # M04000002913

1. Entity Name
TBI OVERSEAS (UK) LLC



Principal Place of Business
**3222 RED CLEVELAND BOULEVARD
SANFORD, FL 32773**

Mailing Address
**3222 RED CLEVELAND BOULEVARD
SANFORD, FL 32773**



02202007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1225339	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	Not Applicable <input type="checkbox"/>

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROBINSON, R. KEITH
3222 RED CLEVELAND BLVD
SANFORD, FL 32773**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CLIFTON, ROGER 3222 RED CLEVELAND BOULEVARD SANFORD, FL 32773
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATFC FRITZ, KIMBRA 3222 RED CLEVELAND BOULEVARD SANFORD, FL 32773
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCDA GOULDTHORPE, LARRY D 3222 RED CLEVELAND BOULEVARD SANFORD, FL 32773
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCD ROBINSON, R. KEITH 3222 RED CLEVELAND BOULEVARD SANFORD, FL 32773
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ACKLEY, DAVID E 3222 RED CLEVELAND BLVD SANFORD, FL 32773
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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U00000662716
03/21/07-80023-025 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *R. Keith Robinson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

2/23/07

Date

407-585-4500

Daytime Phone #