

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000659

Entity Name: TIC VILLAGE SQUARE 10, LLC

FILED
Mar 02, 2007
Secretary of State

Current Principal Place of Business:

1412 WEST IDAHO STREET, SUITE 210
BOISE, ID 83702

New Principal Place of Business:

2 N TAMIAMI TRAIL
SUITE 300
SARASOTA, FL 34236

Current Mailing Address:

1412 WEST IDAHO STREET, SUITE 210
BOISE, ID 83702

New Mailing Address:

2 N TAMIAMI TRAIL
SUITE 300
SARASOTA, FL 34236

FEI Number: 55-3868481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: CORPORATION SERVICE COMPANY

03/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JACKSON, GREGORY D
Address: 2512 NATHANIEL COURT
City-St-Zip: ESCALON, CA 95320

Title: MGRM () Delete
Name: JACKSON, RENEE L
Address: 2512 NATHANIEL COURT
City-St-Zip: ESCALON, CA 95320

ADDITIONS/CHANGES:

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 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: GREGORY D JACKSON

MGRM

03/02/2007

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