

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002458

Entity Name: T.B. SERVICES, L.L.C.

FILED  
Apr 14, 2007  
Secretary of State

**Current Principal Place of Business:**

1630 S.E. GREEN ACRES CIRCLE  
APT H103  
PORT SAINT LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

1630 S.E. GREEN ACRES CIRCLE  
APT H103  
PORT SAINT LUCIE, FL 34952

**New Mailing Address:**

FEI Number: 20-5000332

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WELLS, PATRICIA  
2610 NW HATCHES HARBOR RD 4-206  
PORT ST. LUCIE, FL 34983 US

**Name and Address of New Registered Agent:**

MILLS, PATRICIA  
2610 NW HATCHES HARBOR RD 4-206  
PORT ST. LUCIE, FL 34983 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: PATRICIA MILLS

04/14/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BARRY, THOMAS J JR.  
Address: 1630 S.E. GREEN ACRES CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

**ADDITIONS/CHANGES:**

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: THOMAS J BARRY JR

PRES

04/14/2007

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