## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M83142

FILED Mar 13, 2008 Secretary of State

Entity Nar	me: T&GAE	RO, INC.				
Current P	rincipal Place	e of Business:	New Principal Place of Business:			
	ARK LOOP W OVE SPRING					
Current M	lailing Addres	ss:	New Mailing Address:			
	ARK LOOP W OVE SPRING:					
FEI Number: 59-2900084 FEI Number Applied For ( )			FEI Number Not Applicable ( ) Certificate of Status Desired ( )			1()
Name and	Address of (	Current Registered Agent:	Name and Address of New Registered Agent:			
BLANCO, 6049 ANTI ORANGE		003 US				
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, of	or both,
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ag	ent	Date		
Election Car	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	T ( BLANCO, JUAI 6049 ANTIGUA ORANGE PARI	COURT	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BUTLER, THOI 1120 AIRPARK		Title: Name: Address: City-St-Zip:	DOLLARHIDE 2808 PACES	(X) Change ( ) Addition E, DAVID FERRY ROAD SOUTH RK, FL 32073	
Title: Name: Address: City-St-Zip:	MOODY, EDSE 5256 AIR PARI		Title: Name: Address: City-St-Zip:	SAULTER, PA 10528 FOX S	(X) Change ( ) Addition AUL SQUIRREL LANE LLE, FL 32257	
Title: Name: Address: City-St-Zip:	VP ( ROBERT, RON 573 BENJAMIN ORANGE PARI	I RUSH	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title:	S (X	) Delete	Title:	(	( ) Change ( ) Addition	

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JUAN M BLANCO Τ 03/13/2008

RAYMOND, SMITH

995 FROST STEET

JACKSONVILLE,, FL 32221

Name:

Address:

City-St-Zip: