2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000309

Entity Name: TEP LANDCO, L.L.C.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
SUITE 001	ERSITY DRIVE PRINGS, FL 331				
Current Mailing Address:			New Mailir	New Mailing Address:	
SUITE 001	ERSITY DRIVE				
FEI Number:	65-0872571	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:	
3300 UNIV SUITE 001	, ARTHUR J ERSITY DRIVE PRINGS, FL 33				
The above in the State		ubmits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Ager	t	Date	
MANAGING MEMBERS/MEMBERS:			ADDITION	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () I FALCONE, ARTH 3300 UNIVERSIT CORAL SPRING	Y DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () I EISNER, NEIL 3300 UNIVERSIT CS, FL 33065	Delete Y DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () I FALCON, EDWA 3300 UNIVERSIT CS, FL 33065		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () I DIFORD, CORA 3300 UNIVERSIT CS, FL 33065	Delete Y DR	Title: Name: Address: City-St-Zip:	MGRM (X) Change () Addition DIFORE, CORA 3300 UNIVERSITY DR CS, FL 33065	
Title: Name: Address: City-St-Zip:	MGRM () I EVASLUS, JOHN 3300 UNIVERSIT CS, FL 33065		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () I ICKOVIC, JAN 3300 UNIVERSIT POMPANO BEAC		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CORA DIFIORE MGR 04/30/2004