File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR - 1 AM 10: 36 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company DOCUMENT # 200202 1a. Principal Place of Business Address T.B.F., L.C. au-Atm 24060 DEER RUN ROAD 24060 DEER RUN ROAD BROOKSVILLE FL 34601 BROOKSVILLE FL 34601 2. Principal Place of Business 3. Date Organized or Qualified | 3a. State of Formation 2a. Mailing Address 03/27/1990 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3020147 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 03/11/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name BRONSON, T.E. 24000 DEER RUN DR Street Address (P.O. Box Number is Not Acceptable) BROOKSVILLE FL 34601 <u>600002201026----</u> Suite, Apt. #, etc. -03/10/99--01073--019 ****188.75 ****188.75 City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when redistating) 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code M BRONSON, THOMAS E. 24060 DEER RUN ROAD BROOKSVILLE FL TBF ENTERPRISES, 24060 DEER RUN ROAD BROOKSVILLE FL M 11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther certify that the information indicated on this annual 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 truetee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address. SIGNATURE: SIGNATURE AND TYPE I ON PRINTE O NAME OF SIGNING MEASING MEMBLE OR MAHAGER Daytone Photos #