

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000001845

**Entity Name:** TMPARTNERS-FL, PLLC**Current Principal Place of Business:**211 FRANKLIN ROAD  
SUITE 200  
BRENTWOOD, TN 37027**Current Mailing Address:**211 FRANKLIN ROAD  
SUITE 200  
BRENTWOOD, TN 37027 US**FEI Number:** 62-1014185**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** NATALIE LEIBA-PAUL

03/22/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name COLEMAN, CURTIS  
Address 211 FRANKLIN ROAD  
SUITE 200  
City-State-Zip: BRENTWOOD TN 37027

Title MANAGING MEMBER  
Name ZWICKEL, REID  
Address 211 FRANKLIN ROAD  
SUITE 200  
City-State-Zip: BRENTWOOD TN 37027

Title MANAGING MEMBER  
Name UNDERWOOD, ANDREW  
Address 211 FRANKLIN ROAD  
SUITE 200  
City-State-Zip: BRENTWOOD TN 37027

Title MANAGING MEMBER  
Name CATALANO, ANTHONY  
Address 8131 LAKEWOOD MAIN STREET  
SUITE 202  
City-State-Zip: LAKEWOOD RANCH FL 34202

Title MANAGING MEMBER  
Name MCNEIL, RICH  
Address 211 FRANKLIN ROAD  
SUITE 200  
City-State-Zip: BRENTWOOD TN 37027

Title MANAGING MEMBER  
Name EARWOOD, JEFF  
Address 211 FRANKLIN ROAD  
SUITE 200  
City-State-Zip: BRENTWOOD TN 37027

Title MANAGING MEMBER  
Name COWAN, JOHN PAUL  
Address 211 FRANKLIN ROAD  
SUITE 200  
City-State-Zip: BRENTWOOD TN 37027

Title MANAGING MEMBER  
Name STEWART, JOSH  
Address 211 FRANKLIN ROAD  
SUITE 200  
City-State-Zip: BRENTWOOD TN 37027

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** REID E. ZWICKEL, AIA, ACHA

MEMBER

03/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date