## 2016 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B0400000098

Entity Name: TGA SOD LP

**Current Principal Place of Business:** 

**SUITE 29-323** 

6900 DANIELS PARKWAY

FORT MYERS, FL 33912

**Current Mailing Address:** 

3245 PEACHTREE PKWY., SUITE D-218 SUWANEE, GA 30024

FEI Number: 20-0824264 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**BUSINESS FILINGS INCORPORATED** 515 E PARK AVE TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

**FILED** Mar 14, 2016

**Secretary of State** 

CC7358892656

**General Partner Detail:** 

M0400000869 Document #

TGA MANAGEMENT LLC Name

Address 3245 PEACHTREE PKWY., SUITE D-

City-State-Zip: SUWANEE GA 30024

SIGNATURE: JOHN D OCONNOR

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing General Partner Detail

TGAM/VP

03/14/2016

Date