

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027375

FILED  
Apr 03, 2005  
Secretary of State

Entity Name: TRI-COM MEDIA LLC

**Current Principal Place of Business:**

P.O. BOX 20851  
TAMPA, FL 33622 US

**New Principal Place of Business:**

P.O. BOX 745  
LUTZ, FL 3548 US

**Current Mailing Address:**

P.O. BOX 20851  
TAMPA, FL 33622 US

**New Mailing Address:**

P.O. BOX 745  
LUTZ, FL 33548 US

FEI Number: 20-0115795

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RHOADS, DARYL J  
8618 CHINABERRY DR.  
TAMPA, FL 33637 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: RHOADS, DAYRL J  
Address: 8618 CHINABERRY DR  
City-St-Zip: TAMPA, FL 33637 US

Title: MGRM ( ) Delete  
Name: SUAREZ, MICHAEL E SR.  
Address: 501 BROOKTREE CT.  
City-St-Zip: LUTZ, FL 33548 US

Title: MGRM ( ) Delete  
Name: MUSIAL, MIKE S  
Address: 3908 TUDOR CT.  
City-St-Zip: TAMPA, FL 33614 US

Title: MGRM ( ) Delete  
Name: GULIANO, DEREK  
Address: 14301 BRUCE B DOWNS BLVD.  
City-St-Zip: TAMPA, FL 33613 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL E.SUAREZ SR.

MGRM

04/03/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date