

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016860

Entity Name: TRIDEA PRODUCTS, L.L.C.

FILED  
Jan 12, 2009  
Secretary of State

**Current Principal Place of Business:**

433 E TARPON AVENUE  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

5506 WALSH LANE  
STE 206  
ROGERS, AR 72758

**New Mailing Address:**

5305 VILLAGE PARKWAY  
STE 8  
ROGERS, AR 72758

FEI Number: 20-4312853

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FORD, BOWLUS, DUSS, MORGAN, KENNEY, SAFER  
10110 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32257 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: INFINITY WORLDS, INC. .  
Address: 4304 WOODVIEW DRIVE  
City-St-Zip: ROGERS, AR 72758 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHAD A BUGOS

MR

01/12/2009

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