

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109039

FILED
Apr 30, 2012
Secretary of State

Entity Name: TRISHAS PROFESSIONAL SERVICES " LLC"

Current Principal Place of Business:

20 JUNIPER PASS LANE
OCALA, FL 34480 UN

New Principal Place of Business:

20 JUNIPER PASS LANE
OCALA
OCALA, FL 34480 UN

Current Mailing Address:

20 JUNIPER PASS LANE
OCALA, FL 34480

New Mailing Address:

FEI Number: 27-3159180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, PATRICIA R
20 JUNIPER PASS LANE
OCALA, FL 34480 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: MGR
Name: SMITH, PATRICIA R
Address: 20 JUNIPER PASS LANE
City-St-Zip: Ocala, FL 34480

Title: MGRM
Name: IRWIN, TERRY L
Address: 2817 NE 18TH COURT
City-St-Zip: Ocala, FL 34472

Title: MGRM
Name: SMITH, ROBERT C SR
Address: 1011 OAKLEAF LANE
City-St-Zip: WILDWOOD, FL 34785

Title: MGRM
Name: WILEY, TAMARA L
Address: 989 MONUMENT ROAD APT 812
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM
Name: PATRICIA, AREALLANO
Address: 20 JUNIPER PASS LANE
City-St-Zip: Ocala, FL 34480

I hereby 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: PATRICIA R SMITH

MGR

04/30/2012

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