

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002596

FILED  
Apr 04, 2012  
Secretary of State

**Entity Name:** TRICONY MANAGEMENT, LLC

**Current Principal Place of Business:**

313 1/2 WORTH AVENUE, SUITE B-1  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

313 1/2 WORTH AVENUE, SUITE B-1  
PALM BEACH, FL 33480

**New Mailing Address:**

FEI Number: 65-0873478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRICONY FLORIDA CORP.  
313 1/2 WORTH AVE., STE B-1  
PALM BEACH, FL 33480 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  
Name: TRICONY FLORIDA CORP.  
Address: 313 1/2 WORTH AVE. SUITE B-1  
City-St-Zip: PALM BEACH, FL 33480

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: RICK TORRES

PRES

04/04/2012

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