

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000048104

Entity Name: TRI-CON INC.

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2560-2 BARRINGTON CIRCLE  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 12847  
TALLAHASSEE, FL 32317

**New Mailing Address:**

FEI Number: 16-1725988

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEGER, KRISTI  
2560-2 BARRINGTON CIRCLE  
TALLAHASSEE, FL 32308 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

**OFFICERS AND DIRECTORS:**

Title: MGR  
Name: LEGER, KRISTI  
Address: 3607 MOSSY CREEK  
City-St-Zip: TALLAHASSEE, FL 32311

Title: MGR  
Name: LEGER, ROBERT  
Address: 3607 MOSSY CREEK  
City-St-Zip: TALLAHASSEE, FL 32311

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRISTI LEGER

MGR

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date