2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060366

Entity Name: TREO, LLC

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

PO BOX 834 2328 DESTINY WAY

TARPON SPRINGS, FL 34688 US SUITE A100 ODESSA, FL 33556 US

Current Mailing Address: New Mailing Address:

PO BOX 834

TARPON SPRINGS, FL 34688 US

FEI Number: 20-1492878 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SKAGGS, LLOYD P
5238 STATE ROAD 54
NEW PORT RICHEY, FL 34652 US
SKAGGS, LLOYD P
2328 DESTINY WAY
SUITE A100

ODESSA, FL 33556 US

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.

ADDITIONS/CHANGES:

SIGNATURE: 04/18/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 SKAGGS, LLOYD P
 Name:
 SKAGGS, LLOYD P

 Address:
 5238 STATE ROAD 54
 Address:
 2328 DESTINY WAY, SUITE A100

City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: ODESSA, FL 33556 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: ENERSON, NEIL Name: ENERSON, NEIL

Address: 5238 STATE ROAD 54 Address: 2328 DESTINY WAY, SUITE A100

City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: ODESSA, FL 33556 US

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: NEIL ENERSON MGRM 04/18/2005