## **2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000048104

Entity Name: TRI-CON INC.

**Current Principal Place of Business:** 

5300 BRADFORDVILLE RD TALLAHASSEE, FL 32317

**Current Mailing Address:** 

PO BOX 12998

TALLAHASSEE. FL 32317 US

FEI Number: 16-1725988 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGER, KRISTI 5300 BRADFORDVILLE RD TALLAHASSEE, FL 32317 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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED May 27, 2020

**Secretary of State** 

4213945421CC

Officer/Director Detail:

Title PRESIDENT Title SECRETARY/TRESURER

Name LEGER, KRISTI Name LEGER, ROBERT

Address 5300 BRADFORDVILLE RD Address 5300 BRADFORVILLE RD

City-State-Zip: TALLAHASSEE FL 32309 City-State-Zip: TALLAHASSEE FL 32309

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 MANAGING MEMBER

Electronic Signature of Signing Officer/Director Detail

05/27/2020 Date