

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000107094

**FILED**  
**Feb 07, 2018**  
**Secretary of State**  
**CC7561499529**

**Entity Name:** TRINITY PROFESSIONAL PLACE, LLC

**Current Principal Place of Business:**

3624 W. GRANADA ST.  
TAMPA, FL 33629

**Current Mailing Address:**

3624 W. GRANADA ST.  
TAMPA, FL 33629

**FEI Number: 20-3748859**

**Certificate of Status Desired: No**

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

MCNAMARA, THOMAS P  
2907 BAY TO BAY BLVD., SUITE 201  
TAMPA, FL 33629 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	COCKRELL, BERNARD Y II	Name	LEWIS, CHRISTOPHER R
Address	3624 W. GRANADA ST.	Address	9280 BAY PLAZA BLVD SUITE 726
City-State-Zip:	TAMPA FL 33629	City-State-Zip:	TAMPA FL 33619

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: COCKRELL , BERNARD Y , II**

**MANAGER**

**02/07/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date