

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000081320

**Entity Name:** TRION CENTER, L.L.C.

**Current Principal Place of Business:**

2020 WEST MCNAB ROAD  
101  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

2020 WEST MCNAB ROAD  
101  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 20-5428129

**Certificate of Status Desired:** No

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

WACHS, JEFFREY S  
1177 S.E. 3RD AVENUE  
FORT LAUDERDALE, FL 33316 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            PRESIDENT  
Name            MCGUIRE , CHRISTIANA  
Address        2020 WEST MCNAB ROAD SUITE 101  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** CHRISTIANA MCGUIRE

**PRESIDENT**

**04/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date