

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000053831

**Entity Name:** TRI-CITY VENTURES, LLC

**Current Principal Place of Business:**

1950 FOX GRAPE LOOP  
LUTZ, FL 33556

**Current Mailing Address:**

16212 IVY LAKE DR  
ODESSA, FL 33556

**FEI Number:** 30-0634930

**Certificate of Status Desired:** No

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

GEORGE, THOMAS  
16212 IVY LAKE DR  
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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           THOMAS, GEORGE  
Address        16212 IVY LAKE DR  
City-State-Zip: ODESSA FL 33556

Title           MGRM  
Name           THOMAS, SUJIT JOSEPH  
Address        1950 FOX GRAPE LOOP  
City-State-Zip: LUTZ FL 33556

Title           AUTHORIZED MEMBER  
Name           THOMAS, MARY  
Address        1950 FOX GRAPE LOOP  
City-State-Zip: LUTZ FL 33556

Title           AUTHORIZED MEMBER  
Name           PAUL, JONATHAN  
Address        6473 NORTH REGAL MANOR DR.  
City-State-Zip: TUCSON AZ 85750

Title           AUTHORIZED MEMBER  
Name           PAUL, AMELIA  
Address        6473 N. REGAL MANOR DR  
City-State-Zip: TUCSON AZ 85750

*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:** GEORGE THOMAS

**MANAGER**

**07/01/2021**

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

\_\_\_\_\_  
Date