

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000138610

**Entity Name:** T.R.G.25LLC**Current Principal Place of Business:**1510 CAPITAL CIRCLE SE  
SUITE 3  
TALLAHASSEE, FL 32301**Current Mailing Address:**7003 ATASCADERO LN  
TALLAHASSEE, FL 32317 US**FEI Number:** 85-1080685**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CROMARTIE, CLAUDETTE  
7003 ATASCADERO LN  
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:** CLAUDETTE CROMARTIE

04/07/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR
Name	LARRY, EUGENE C
Address	1510 CAPITAL CIRCLE SE SUITE 3
City-State-Zip:	TALLAHASSEE FL 32301

Title	MGR
Name	HOLMES, ROBERT
Address	1510 CAPITAL CIRCLE SE SUITE 3
City-State-Zip:	TALLAHASSEE FL 32301

Title	MGR
Name	CROMARTIE, CLAUDETTE
Address	1510 CAPITAL CIRCLE SE SUITE 3
City-State-Zip:	TALLAHASSEE FL 32301

Title	MGR
Name	STRONG, LATOYA
Address	1510 CAPITAL CIRCLE SE SUITE 3
City-State-Zip:	TALLAHASSEE FL 32301

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:** CLAUDETTE CROMARTIE**REGISTERED AGENT**

04/07/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date