

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005149

FILED
Apr 14, 2009
Secretary of State

Entity Name: TRIFECTA TALLAHASSEE I, INC.

Current Principal Place of Business:

28035 DOROTHY DRIVE
SUITE 240
AGOURA HILLS, CA 91301

New Principal Place of Business:

Current Mailing Address:

28035 DOROTHY DRIVE
SUITE 240
AGOURA HILLS, CA 91301

New Mailing Address:

FEI Number: 26-2469103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPS () Delete
Name: MUSSBAUM, BRUCE
Address: 28035 DOROTHY DRIVE, SUITE 240
City-St-Zip: AGOURA HILLS, CA 91301

Title: TD () Delete
Name: AUGER, MICHAEL
Address: 28035 DOROTHY DRIVE, SUITE 240
City-St-Zip: AGOURA HILLS, CA 91301

Title: VPD () Delete
Name: LAUN, RON
Address: 28035 DOROTHY DRIVE, SUITE 240
City-St-Zip: AGOURA HILLS, CA 91301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: NUSSBAUM, BRUCE
Address: 28035 DOROTHY DRIVE, SUITE 240
City-St-Zip: AGOURA HILLS, CA 91301

Title: PD (X) Change () Addition
Name: AUGER, MICHAEL
Address: 28035 DOROTHY DRIVE, SUITE 240
City-St-Zip: AGOURA HILLS, CA 91301

Title: PTD (X) Change () Addition
Name: LAM, RON
Address: 28035 DOROTHY DRIVE, SUITE 240
City-St-Zip: AGOURA HILLS, CA 91301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRUCE NUSSBAUM

PSD

04/14/2009

Electronic Signature of Signing Officer or Director

Date