

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H32784

FILED  
Feb 15, 2009  
Secretary of State

Entity Name: TRY ENTERPRISES INTERNATIONAL, INC.

## Current Principal Place of Business:

% DEAN A. TRYGGESETH  
2002 KISER DRIVE  
VALRICO, FL 33594

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 1134  
2002 KISER DRIVE  
VALRICO, FL 33594 US

## New Mailing Address:

% DEAN A. TRYGGESETH  
2002 KISER DRIVE  
VALRICO, FL 33594

FEI Number: 59-2526525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRYGGESETH, ELIZABETH  
2002 KISER  
VALRICO, FL 33594 US

## Name and Address of New Registered Agent:

TRYGGESETH, ELIZABETH DIR.  
2002 KISER  
VALRICO, FL 33594 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: ELIZABETH B. TRYGGESETH

02/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: TRYGGESETH, DEAN A.,  
Address: 2002 KISER DRIVE  
City-St-Zip: VALRICO, FL

Title: TSD ( ) Delete  
Name: TRYGGESETH, ELIZABETH, H B.  
Address: 2002 KISER DRIVE  
City-St-Zip: VALRICO, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: TRYGGESETH, DEAN A PRES  
Address: 2002 KISER DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: TSD (X) Change ( ) Addition  
Name: TRYGGESETH, ELIZABETH B DIR  
Address: 2002 KISER DRIVE  
City-St-Zip: VALRICO, FL 33594

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: DEAN A. TRYGGESETH

PRES

02/15/2009

Electronic Signature of Signing Officer or Director

Date