## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J75088

Entity Name: TRIPLE A PROPERTIES, INC.

FILED Apr 03, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

2500 DUNDEE RD 2500 DUNDEE RD

WINTER HAVEN, FL 338841015 US WINTER HAVEN, FL 33884 US

Current Mailing Address: New Mailing Address:

2500 DUNDEE RD 2500 DUNDEE RD

WINTER HAVEN, FL 338841015 US WINTER HAVEN, FL 33884 US

FEI Number: 59-2871339 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FORREST, PAULA A 2500 DUNDEE ROAD WINTER HAVEN, FL 33884 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: VD (X) Change () Addition Name: ADAMS, THOMAS E. Name: ADAMS, THOMAS E.

 Name:
 ADAMS, THOMAS E.
 Name:
 ADAMS, THOMAS E.

 Address:
 1855 OVERLOOK DR
 Address:
 108 LAKE RING DRIVE

 City-St-Zip:
 WINTER HAVEN, FL
 City-St-Zip:
 WINTER HAVEN, FL
 33884

Title: STD () Delete Title: STD (X) Change () Addition Name: ADAMS, DANIEL J. Name: ADAMS, DANIEL J.

Name:ADAMS, DANIEL J.Name:ADAMS, DANIEL J.Address:2530 PARTRIDGE DRAddress:2530 PARTRIDGE DRCity-St-Zip:WINTER HAVEN, FLCity-St-Zip:WINTER HAVEN, FL33884

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name:FORREST, PAULA AName:FORREST, PAULA AAddress:3944 CYPRESS LANDING, W.Address:5000 LAKE PIERCE DRIVECity-St-Zip:WINTER HAVEN, FLCity-St-Zip:LAKE WALES, FL 33898

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: DANIEL ADAMS STD 04/03/2009