

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012658

Entity Name: TRIAD PROPERTIES, LLC

FILED
Feb 11, 2005
Secretary of State

Current Principal Place of Business:

826 OAK POND DRIVE
OSPREY, FL 34229

New Principal Place of Business:

4520 TUSCANA DRIVE
SARASOTA, FL 34241 US

Current Mailing Address:

826 OAK POND DRIVE
OSPREY, FL 34229

New Mailing Address:

4520 TUSCANA DRIVE
SARASOTA, FL 34241 US

FEI Number: 65-1047761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILBERSTEIN, DAVID M
720 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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

MANAGING MEMBERS/MEMBERS:

Title: MEM () Delete
Name: GRANDE, JASON P
Address: 826 OAK POND DRIVE
City-St-Zip: OSPREY, FL 34229

Title: MEM (X) Delete
Name: PERRONE, RICHARD
Address: 219 PALMETTO AVENUE
City-St-Zip: OSPREY, FL 34229

Title: MEM (X) Delete
Name: CHAPMAN FAMILY LIMIT, ED PARTNERSHIP
Address: 502 EAST JOHN STREET
City-St-Zip: CARSON CITY, NV 89706

Title: MGR (X) Delete
Name: TRES VIDAS PROPERTIE, S, LLC
Address: 826 OAK POND DRIVE
City-St-Zip: OSPREY, FL 34236

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TRES VIDAS PROPERTIE, S, LLC
Address: 4520 TUSCANA DRIVE
City-St-Zip: SARASOTA, FL 34241 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JASON P. GRANDE

MGR

02/11/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date