


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000017529 1. Entity Name TRI-FAM INVESTMENTS, LLC	
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Principal Place of Business 1580 GRACEWOOD LANE VERO BEACH, FL 32963	Mailing Address 1580 GRACEWOOD LANE VERO BEACH, FL 32963
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DO NOT WRITE IN THIS SPACE



03082004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 52-2366509	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BLOCK, SAMUEL A ESQ. 979 BEACHLAND BOULEVARD VERO BEACH, FL 32963	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST HOPKINS, SUSAN R 1580 GRACEWOOD LANE VERO BEACH, FL 32963
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03/15/04 80100-013 50.00

11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Susan R. Hopkins</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<u>3/11/04</u> <u>(m) 231-7512</u> <small>Date Daytime Phone #</small>
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