## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## ANNUAL REPORT **FILED** Mar 31, 2006 08:00 AM Secretary of State DOCUMENT # L03000021594 TRINITY BUILDING, L.L.C. Principal Place of Business Mailing Address 7377 ROYAL OAK DRIVE 7377 ROYAL OAK DRIVE SPRING HILL, FL 34607 SPRING HILL, FL 34607 03122006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-3118770 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GASSMAN, ALAN S ESQ. DO NOT WRITE 1245 COURT STREET, SUITE 102 CLEARWATER, FL 33756 IN THIS SPACE 5. 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 Signature, typed or printed name of repretered agent and trill if applicable (MOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 U00000487478 04/13/06-80078-011 50.00 Ø. MANAGING MEMBERS/MANAGERS MGR TITLE NAME DEVABOSE, NATHAN C 7377 ROYAL OAK DRIVE STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34607 TITLE NAME STREET ADDRESS City-ST-ZiP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 it 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:

CITY\_ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NATHAN

C. DEVABOSE

3/21/06

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