

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000022260

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** TRISTAR CUSTOM HOMES, L.L.C.

**Current Principal Place of Business:**

4374 FIFTH AVE  
PACE, FL 32571

**New Principal Place of Business:**

**Current Mailing Address:**

4374 FIFTH AVE  
PACE, FL 32571

**New Mailing Address:**

**FEI Number:** 43-2019569

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BREWSTER, JAMES R  
547 N. MONROE STREET STE. 203  
TALLAHASSEE, FL 32301 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/MANAGERS:**

**Title:** MGRM  
**Name:** FOSTER, ROBERT D  
**Address:** 1800 HOWELL PITT ROAD  
**City-St-Zip:** JAY, FL 32565

**Title:** MGRM  
**Name:** JACKSON, LAWRENCE  
**Address:** PO BOX 413  
**City-St-Zip:** JAY, FL 32565

**Title:** MGRM  
**Name:** BRANNON, MARCUS  
**Address:** 8971 BYROM CAMPBELL ROAD  
**City-St-Zip:** PACE, FL 32571

I hereby 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:** ROBERT FOSTER

MGRM

04/30/2012

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