

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000024877

**FILED**  
**Mar 03, 2012**  
**Secretary of State**

**Entity Name:** TRIPLE J PROPERTIES LLC

**Current Principal Place of Business:**

6400 YELLOW WOOD PLACE  
SARASOTA, FL 34241

**New Principal Place of Business:**

**Current Mailing Address:**

6400 YELLOW WOOD PLACE  
SARASOTA, FL 34241

**New Mailing Address:**

**FEI Number:** 20-0077783

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARDEN, JULIE A  
6400 YELLOW WOOD PLACE  
SARASOTA, FL 34241 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:** P  
**Name:** ARDEN, JULIE A  
**Address:** 6400 YELLOW WOOD PL  
**City-St-Zip:** SARASOTA, FL 34241

**Title:** VP  
**Name:** ESLINGER, JEFFERY D  
**Address:** 4801 SWEETSHADE DR.  
**City-St-Zip:** SARASOTA, FL 34241

**Title:** TS  
**Name:** LIBERTY SAVINGS BANK  
**Address:** 1800 SECOND ST., STE 104  
**City-St-Zip:** SARASOTA, FL 34236

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:** JULIE A. ARDEN

P

03/03/2012

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