

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000032115

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** TRELAWNY ENTERPRISES, LLC

**Current Principal Place of Business:**

424 DR.MARTIN LUTHER KING JR BLVD,E.  
BELLE GLADE,, FL 33430

**New Principal Place of Business:**

**Current Mailing Address:**

424 DR.MARTIN LUTHER KING JR BLVD,E.  
BELLE GLADE,, FL 33430

**New Mailing Address:**

**FEI Number:** 20-0179509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, DUDLEY A  
13166 SW 21 STREET  
MIRAMAR, FL 33027 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:** WILSON, CARL A  
**Address:** 9339 CLASSICO WEST  
**City-St-Zip:** WELLINGTON, FL 33411 US

**Title:** MGRM  
**Name:** PALMER, BRUCE C  
**Address:** 9163 NW 20TH MANOR  
**City-St-Zip:** CAROL SPRINGS, FL 33071 US

**Title:** MGRM  
**Name:** BROWN, DUDLEY A  
**Address:** 13166 S.W. 21 STREET  
**City-St-Zip:** MIRAMAR, FL 33027 US

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:** DUDLEY A BROWN

MGRM

02/08/2011

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