

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035593

Entity Name: TRIMCO OF FLORIDA, L.L.C.

FILED  
Jan 26, 2009  
Secretary of State

**Current Principal Place of Business:**

1993 S HWY 27  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 120852  
CLERMONT, FL 34712

**New Mailing Address:**

1993 S. HIGHWAY 27  
CLERMONT, FL 34711

FEI Number: 16-1684430

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUSS, CHARLES R  
12512 SOUTH LAKESHORE DRIVE  
CLERMONT, FL 34711 US

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

RUSS, CHARLES R  
12512 LAKESHORE DRIVE  
CLERMONT, FL 34711 US

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:

01/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RUSS, CHARLES R  
Address: 12512 LAKESHORE DRIVE  
City-St-Zip: CLERMONT, FL 34711

Title: MGR ( ) Delete  
Name: RUSS, DIANNE O  
Address: 12512 LAKESHORE DRIVE  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DIANNE RUSS

MGR

01/26/2009

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