

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039409

FILED
Jan 05, 2006
Secretary of State

Entity Name: TRI COUNTY DEVELOPMENTS, LLC

Current Principal Place of Business:

922 SE 14TH PLACE
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

922 SE 14TH PLACE
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 20-0304837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WANDERON, THOMAS
868 106TH AVENUE N.
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

WANDERON, THOMAS
809 WALKERBILT RD ST. 5
NAPLES, FL 34110 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: THOMAS WANDERON

01/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SEIDL, MILO
Address: 1790 WHITECAP CIRCLE
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: MGRM () Delete
Name: SEIDL, MICHELLE
Address: 1790 WHITECAP CIRCLE
City-St-Zip: NORTH FT. MYERS, FL 33903

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 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: MICHELLE SEIDL

VP

01/05/2006

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