

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000015450

**FILED**  
**Jan 09, 2007**  
**Secretary of State**

**Entity Name:** TRI-ACTION DEVELOPMENT LLC

**Current Principal Place of Business:**

P.O. BOX 111301  
NAPLES, FL 34108

**New Principal Place of Business:**

4860 MAHOGANY RIDGE DR  
NAPLES, FL 34119

**Current Mailing Address:**

P.O. BOX 111301  
NAPLES, FL 34108

**New Mailing Address:**

**FEI Number:** 20-1029367

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOLLITTO, ERIC D MR  
PO BOX 111301  
NAPLES, FL 34108 US

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

SOLLITTO, ERIC D MR  
4860 MAHOGANY RIDGE DR  
NAPLES, FL 34119 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: ERIC SOLLITTO

01/09/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SOLLITTO, ERIC D MR  
Address: 5060 TEAKWOOD DR  
City-St-Zip: NAPLES, FL 34119 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SOLLITTO, ERIC D MR  
Address: 4860 MAHOGANY RIDGE DR  
City-St-Zip: NAPLES, FL 34119 US

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: ERIC SOLLITTO

VP

01/09/2007

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