

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036864

FILED
Apr 13, 2009
Secretary of State

Entity Name: TRIVIM ENTERPRISES, LLC

Current Principal Place of Business:

404 NEW WATERFORD PLACE
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

404 NEW WATERFORD PLACE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 41-2137982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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 () Delete
Name: HEAFY, MATTHEW K MR
Address: 404 NEW WATERFORD PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: BEAULIEU, COREY K MR
Address: 404 NEW WATERFORD PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: SMITH, TRAVIS L MR
Address: 804 RIO ALA MANO DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: GREGOLETTO, PAOLO F MR
Address: 19 SW 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGR () Delete
Name: HEAFY, BRIAN B
Address: 404 NEW WATERFORD PLACE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES:

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

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

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

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: BRIAN B HEAFY

MGR

04/13/2009

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