

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052309

Entity Name: TRIDEN-KBC, LLC

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

112 N HILLCREST AVE
CLEARWATER, FL 33755

New Principal Place of Business:

548 SCOTLAND STREET
DUNEDIN, FL 34698

Current Mailing Address:

112 N HILLCREST AVE
CLEARWATER, FL 33755

New Mailing Address:

548 SCOTLAND STREET
DUNEDIN, FL 34698

FEI Number: 20-1372276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARE, DENNIS M
112 N HILLCREST AVE
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

HARE, DENNIS M
548 SCOTLAND STREET
DUNEDIN, FL 34698 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: DENNIS M HARE

04/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HARE, DENNIS M
Address: 112 N HILLCREST AVE
City-St-Zip: CLEARWATER, FL 33755

Title: MGMR () Delete
Name: SULLIVAN, PATRICIA A
Address: 56 PEPPERMILL DRIVE
City-St-Zip: CARTERSVILLE, GA 30120

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HARE, DENNIS M
Address: 548 SCOTLAND STREET
City-St-Zip: DUNEDIN, FL 34698

Title: MGRM (X) Change () Addition
Name: SULLIVAN, PATRICIA A
Address: 56 PEPPERMILL DRIVE
City-St-Zip: CARTERSVILLE, GA 30120

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DENNIS M HARE

MGRM

04/26/2005

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