

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053827

FILED
Jul 21, 2005
Secretary of State

Entity Name: TREBBIO WAY, LLC

Current Principal Place of Business:

27300 RIVERVIEW CENTER BLVD, STE 201
BONITA SPRINGS, FL 34134

New Principal Place of Business:

27599 RIVERVIEW CENTER BLVD, STE 105
BONITA SPRINGS, FL 34134

Current Mailing Address:

27300 RIVERVIEW CENTER BLVD, STE 201
BONITA SPRINGS, FL 34134

New Mailing Address:

27599 RIVERVIEW CENTER BLVD, STE 105
BONITA SPRINGS, FL 34134

FEI Number: 20-1388102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KANNENSOHN, JEFFREY S ESQ
C/O PORTER, WRIGHT, MORRIS & ARTHUR, LLP
5801 PELICAN BAY BLVD, STE 300
NAPLES, FL 341082709 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: MGR () Delete
Name: MCGARVEY, JOHN S
Address: 27300 RIVERVIEW CENTER BLVD, STE 201
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCGARVEY, JOHN S
Address: 27599 RIVERVIEW CENTER BLVD, STE 105
City-St-Zip: BONITA SPRINGS, FL 34134

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: JOHN S MCGARVEY

MGR

07/21/2005

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