

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078148

FILED  
Apr 26, 2009  
Secretary of State

**Entity Name:** TRYALL INVESTMENTS ONE LLC

**Current Principal Place of Business:**

P.O. BOX 616338  
ORLANDO, F 32861

**New Principal Place of Business:**

1321 SELBYDON WAY  
WINTERGARDEN, FL 34787

**Current Mailing Address:**

P.O. BOX 616338  
ORLANDO, F 32861

**New Mailing Address:**

POST OFFICE BOX 616338  
ORLANDO, FL 32861

FEI Number: 20-1801406

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SERVICE, EUDEL S  
1321 SELBYDON WAY  
WINTERGARDEN, FL 34987 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: SERVICE, EUDEL S  
Address: 1321 SELBYDON WAY  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM ( ) Delete  
Name: SERVICE, GRENNETT  
Address: 1321 SELBYDON WAY  
City-St-Zip: WINTER GARDEN, FL 34787

**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 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: EUDEL S SERVICE

MGRM

04/26/2009

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