

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000013254

Entity Name: TRI- COUNTY TILE LLC

**FILED**  
**Mar 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

15236 KITTRELL DR.  
BROOKSVILLE, FL 34610

**New Principal Place of Business:**

**Current Mailing Address:**

15236 KITTRELL DR.  
BROOKSVILLE, FL 34610

**New Mailing Address:**

FEI Number: 59-3126203

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELMONT, JAMES J  
15236 KITTRELL DR.  
BROOKSVILLE, FL 34610 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  
Name: BELMONT, JAMES J  
Address: 15236 KITTRELL DR.  
City-St-Zip: BROOKSVILLE, FL 34610

Title: MGRM  
Name: BELMONT, PATRICIA A  
Address: 15236 KITTRELL DR.  
City-St-Zip: BROOKSVILLE, FL 34610 US

I hereby 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: JAMES BELMONT

OWNE

03/30/2012

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