

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038273

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: MEDPARK DEVELOPMENT - TRINITY, LLC

**Current Principal Place of Business:**

1110 N. FLORIDA AVENUE  
TAMPA, FL 33602

**New Principal Place of Business:**

302 KNIGHTS RUN AVE.  
#1100  
TAMPA, FL 33602

**Current Mailing Address:**

POST OFFICE BOX 272046  
TAMPA, FL 33688

**New Mailing Address:**

FEI Number: 20-2699336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COHN, VANESSA N ESQ.  
1110 N. FLORIDA AVENUE  
TAMPA, FL 33602 US

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

REIBER, TYLER D  
6211 SAVANNAH BREEZE CT.  
#104  
TAMPA, FL 33625 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: TYLER REIBER

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: REIBER, TYLER D  
Address: P.O. BOX 272046  
City-St-Zip: TAMPA, FL 33688 US

**ADDITIONS/CHANGES:**

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: TYLER REIBER

MGRM

04/30/2009

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