

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045109

FILED
Jun 10, 2010
Secretary of State

Entity Name: TROPIQUEST, L.L.C.

Current Principal Place of Business:

322 WOODS AVENUE
TAVERNIER, FL 33070

New Principal Place of Business:

Current Mailing Address:

322 WOODS AVENUE
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: 20-2841202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEAR, RALPH E
322 WOODS AVENUE
TAVERNIER, FL 33070 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
Name: DEVROEDT, MARK
Address: 15360 N.E. 1ST COURT
City-St-Zip: TAVERNIER, FL 33070

Title: MGRM
Name: SPEAR, RALPH E
Address: 322 WOODS AVENUE
City-St-Zip: TAVERNIER, FL 33070

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: RALPH SPEAR

MGRM

06/10/2010

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