

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000090844

FILED
Mar 26, 2007
Secretary of State

Entity Name: HIGLEY TRIO, LLC

Current Principal Place of Business:

613 BARNES PKWY
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

613 BARNES PKWY
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 86-1152864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNS, CHRISTINE
613 BARNES PKWY
NOKOMIS, FL 34275 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: JOHNS, CHRISTINE
Address: 613 BARNES PKWY
City-St-Zip: NOKOMIS, FL 34275

Title: MGRM () Delete
Name: HIGLEY, GREGORY
Address: 1206 IDLEWILD AVE
City-St-Zip: TAMPA, FL 33604

Title: MGRM () Delete
Name: HIGLEY, DOUGLAS
Address: 6185 55TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33709

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: CHRISTINE M JOHNS

MGRM

03/26/2007

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