

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000105062

1. Entity Name
TRI-MEK HOMES, LLC



Principal Place of Business
5433 N. 59TH STREET
TAMPA, FL 33610

Mailing Address
5433 N. 59TH STREET
TAMPA, FL 33610



01182008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0572469

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

MEKDECI, STEPHEN
5433 N. 59TH STREET
TAMPA, FL 33610

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MEKDECI, STEPHEN
STREET ADDRESS	13503 GIBBONS PASS
CITY-ST-ZIP	TAMPA, FL 33613
TITLE	MGRM
NAME	MEKDECI, PATRICK
STREET ADDRESS	18989 CROOKED LANE
CITY-ST-ZIP	LUTZ, FL 33548
TITLE	MGRM
NAME	MEKDECI, RYAN
STREET ADDRESS	3026 LAKE SAXON DRIVE
CITY-ST-ZIP	LAND O LAKES, FL 34639
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000797819
01/30/08-00004-007 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Stephen Mekdeci **STEPHEN MEKDECI**

JANUARY 22, 2008 (813) 626-3375

Date

Daytime Phone #