

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-13-2006 90034 021 ****50.00

DOCUMENT # L05000110275

1. Entity Name
TRH, LLC



Principal Place of Business
819 GARDEN CLUB DRIVE
PANAMA CITY, FL 32401

Mailing Address
819 GARDEN CLUB DRIVE
PANAMA CITY, FL 32401

30005352



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03102006 Chg-LLC CR2E083 (11/05)

City & State

City & State

4. FEI Number
APPLIED FOR Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARLOGA, SCOTT B
220 MCKENZIE AVE.
PANAMA CITY, FL 32402

Name
TERRY H. RUBIN-HOLLOWAY
Street Address (P.O. Box Number is Not Acceptable)

819 GARDEN CLUB DR.

City **PANAMA CITY** FL Zip Code **32401**

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

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR
RUBIN-HOLLOWAY, TERRY
819 GARDEN CLUB DRIVE
PANAMA CITY, FL 32401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

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 608, Florida Statutes.

SIGNATURE:

Terry Rubin-Holloway

4/10/06

(850) 785-6205

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

Date

Daytime Phone #

ATTACHMENT
30006362

#L05000110275

Please note -

Application for FEI
number has been
forwarded to IRS.

\$50.00 application
fee is on record.

Thank you.

