

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000240

FILED
May 03, 2010
Secretary of State

Entity Name: TREBOR ST. LOUIS, LLC

Current Principal Place of Business:

NORTHBRIDGE CENTRE
515 NORTH FLAGLER DRIVE, SUITE 808
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

NORTHBRIDGE CENTRE
515 NORTH FLAGLER DRIVE, SUITE 808
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEWIS, HAROLD L
ONE BISCAYNE TOWER, SUITE 2400
2 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: CUILLO, ROBERT
Address: 515 NORTH FLAGLER DRIVE, SUITE 808
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T
Name: HOTARY, MICHAEL
Address: 515 NORTH FLAGLER DRIVE, SUITE 808
City-St-Zip: WEST PALM BEACH, FL 33401

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: ROBERT S CUILLO

MGRM

05/03/2010

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