

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000016743

Entity Name: TRIPLE L, LLC

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5775 FAIRBANKS FERRY ROAD  
HAVANA, FL 32333

**New Principal Place of Business:**

**Current Mailing Address:**

5775 FAIRBANKS FERRY ROAD  
HAVANA, FL 32333

**New Mailing Address:**

FEI Number: 20-4318729

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LILLIBRIDGE, GLENN  
5775 FAIRBANKS FERRY ROAD  
HAVANA, FL 32333 US

**Name and Address of New Registered Agent:**

LILLIBRIDGE, JOSEY  
5775 FAIRBANKS FERRY ROAD  
HAVANA, FL 32333 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: JOSEY LILLIBRIDGE

04/26/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LILLIBRIDGE, JOSEY  
Address: 5775 FAIRBANKS FERRY ROAD  
City-St-Zip: HAVANA, FL 32333

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: JOSEY LILLIBRIDGE

MGRM

04/26/2011

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