2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 21, 2012
Secretary of State

DOCUMENT# L06000089598

Entity Name: TRIPODI MANAGEMENT, LLC

Current Principal Place of Business:

3069 HOBART STREET
2O
WOODSIDE, NY 11377 US

New Principal Place of Business:

4919 SW 41ST PLACE
OCALA, FL 34474 US

Current Mailing Address:

3069 HOBART STREET
2O
WOODSIDE, NY 11377 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRIPODI, MARIA C
4919 SW 41ST PLACE
OCALA, FL 34474 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
Name: TRIPODI, MARIA C
Address: 4919 41ST PLACE
City-St-Zip: OCALA, FL 34474 US

Title: MGRM
Name: TRIPODI, CHARLES C
Address: 3069 HOBART STREET #2O
City-St-Zip: WOODSIDE, NY 11377 US

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 Statues.

SIGNATURE: CHARLES TRIPODI MGRM 02/21/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date