

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109984

FILED
Apr 24, 2007
Secretary of State

Entity Name: TRI-COUNTY PROFESSIONALS, LLC

Current Principal Place of Business:

1000 WEST MAIN STREET
LEESBURG, FL 34748

New Principal Place of Business:

500 NW 43RD STREET
SUITE #3
GAINESVILLE, FL 32607

Current Mailing Address:

P.O. BOX 49137
LEESBURG, FL 347491357

New Mailing Address:

500 NW 43RD STREET
SUITE #3
GAINESVILLE, FL 32607

FEI Number: 20-5876504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LYTLE, ROBERT W II
500 NW 43RD STREET #3
GAINESVILLE, FL 32607 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: MGR () Delete
Name: LYTLE, ROBERT W II
Address: 500 NW 43RD STREET, #3
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: CHUCHI BALINGIT

MEM

04/24/2007

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