

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000020500

**FILED**  
**Feb 16, 2009**  
**Secretary of State**

**Entity Name:** TROPICAL NON-MEDICAL TRANSPORTATION, LLC

**Current Principal Place of Business:**

1241 PINEWAY DRIVE  
WEST PALM BEACH, FL 33417

**New Principal Place of Business:**

2200 N. FLORIDA MANGO ROAD  
SUITE 402  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

2200 N FLORIDA MANGO RD, STE 402  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

2200 N. FLORIDA MANGO ROAD  
SUITE 402  
WEST PALM BEACH, FL 33409

**FEI Number:** 71-1025446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TROPICAL TRANSPORTATION LLC  
5762 OKEECHOBEE BLVD  
S-205  
WEST PALM BEACH, FL 33417 US

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

TROPICAL TRANSPORTATION LLC  
2200 N. FLORIDA MANGO  
SUITE 402  
WEST PALM BEACH, FL 33409 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:** HOWARD F. BERKOWITZ

02/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** HESTER, DANNY  
**Address:** 1241 PINEWAY DRIVE  
**City-St-Zip:** WEST PALM BEACH, FL 33417

**Title:** MGRM ( ) Delete  
**Name:** BERKOWITZ, HOWARD F  
**Address:** 6336 SHINNECOCK LANE  
**City-St-Zip:** LAKE WORTH, FL 33463

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify 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:** HOWARD F. BERKOWITZ

VP

02/16/2009

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