

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # L07000089167 1. Entity Name TRI ESTATE PROPERTY INVESTMENT LLC	
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Principal Place of Business 9125 WYNDHURST CT JACKSONVILLE, FL 32244	Mailing Address 9125 WYNDHURST CT JACKSONVILLE, FL 32244
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DO NOT WRITE IN THIS SPACE

01112008167 Chg-LLC CR2E005 (12/07)

4. FEI Number 26-0781375	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ANDREWS, BERTRAM
704 SATSUMA AVE.
PANAMA CITY, FL 32401**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered agent signature required when reappointing)
Signature, typed or printed name of reappointed agent and date if applicable. _____ Date _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2009 Fee will be \$538.75**

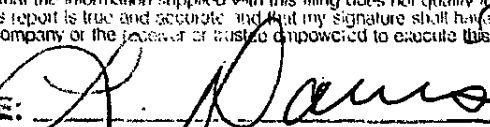
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM DAVIS, LAQUINTA 9125 WYNDHURST CT JACKSONVILLE, FL 32244
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04/08/08-80101-004-138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate, and that my 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 605, Florida Statutes.

SIGNATURE:  _____
Signature and typed or printed name of signing managing member, or authorized representative. _____ Date _____