

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000093804

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** TREASURE COAST ESCROW MANAGEMENT, LLC

**Current Principal Place of Business:**

500 VIRGINIA AVENUE, SUITE 200  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

426 AVENUE A  
FORT PIERCE, FL 34950

**Current Mailing Address:**

500 VIRGINIA AVENUE, SUITE 200  
FORT PIERCE, FL 34982

**New Mailing Address:**

426 AVENUE A  
FORT PIERCE, FL 34950

**FEI Number:** 26-1239836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEE, FRANK H IV  
500 VIRGINIA AVENUE, SUITE 200  
FORT PIERCE, FL 34982 US

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

FEE, FRANK H IV  
426 AVENUE A  
FORT PIERCE, FL 34950 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: \_\_\_\_\_

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FEE, FRANK III  
Address: 426 AVENUE A  
City-St-Zip: FORT PIERCE, FL 34950

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: FRANK H FEE III

MGRM

04/30/2010

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