

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112226

FILED  
May 11, 2009  
Secretary of State

Entity Name: THE TROJAN GROUP, LLC

## Current Principal Place of Business:

2677 GLENEAGLES DRIVE  
CLEARWATER, FL 33761

## New Principal Place of Business:

## Current Mailing Address:

2677 GLENEAGLES DRIVE  
CLEARWATER, FL 33761

## New Mailing Address:

FEI Number: 26-0803071      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

HART, THOMAS J JR.  
2677 GLENEAGLES DRIVE  
CLEARWATER, FL 33761      US

## Name and Address of New Registered Agent:

ALTOBELLI, KEITH A  
140 INFANTRY WAY  
MARIETTA, FL 30064      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: KEIH ALTOBELLI

05/11/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: HART, THOMAS J JR.  
Address: 2677 GLENEAGLES DRIVE  
City-St-Zip: CLEARWATER, FL 33761

Title: MGR      ( ) Delete  
Name: ALTOBELLI, KEITH  
Address: 140 INFANTRY WAY  
City-St-Zip: MARIETTA, GA 30064

Title: MGR      ( ) Delete  
Name: POLLOCK, RAYMOND B  
Address: 25326 OAKS BLVD.  
City-St-Zip: LAND O'LAKES, FL 34639

Title: MGR      ( ) Delete  
Name: MILLER, DEBBIE  
Address: 6609 GATES POINTE WAY  
City-St-Zip: RIVERVIEW, FL 33569

## ADDITIONS/CHANGES:

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

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

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: KEITH ALTOBELLI

MGR

05/11/2009

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