

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023814

FILED
Mar 06, 2009
Secretary of State

Entity Name: TRES BESITOS, LLC

Current Principal Place of Business:

7340 NW US HWY. 27, SUITE 201
OCALA, FL 34482

New Principal Place of Business:

Current Mailing Address:

7340 NW US HWY. 27, SUITE 201
OCALA, FL 34482

New Mailing Address:

FEI Number: 80-0157966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: TRUST U/A CHRISTINA, W. WHITNEY, 19 9 1
Address: PO BOX 772109
City-St-Zip: OCALA, FL 344772109

Title: MGR () Change (X) Addition
Name: TRUST U/A CHARLOTTE, C. WEBER FBO C H R 2000
Address: PO BOX 772109
City-St-Zip: OCALA, FL 344772109

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: EDGAR VERGARA

ACCT

03/06/2009

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