

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000116733

FILED  
Jul 13, 2009  
Secretary of State

Entity Name: TREKRONOR REALTY LLC

**Current Principal Place of Business:**

873 SECOND AVENUE SOUTH  
TIERRA VERDE, FL 33715

**New Principal Place of Business:**

**Current Mailing Address:**

873 SECOND AVENUE SOUTH  
TIERRA VERDE, FL 33715

**New Mailing Address:**

FEI Number: 04-6241308      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:**

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

MOSSBERG, ALAN I  
873 SECOND AVENUE SOUTH  
TIERRA VERDE, FL 33715      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: MOSSBERG, ALAN I  
Address: 873 SECOND AVENUE SOUTH  
City-St-Zip: TIERRA VERDE, FL 33715

Title: MGRM      ( ) Delete  
Name: MOSSBERG, JAYNE E  
Address: 873 SECOND AVENUE SOUTH  
City-St-Zip: TIERRA VERDE, FL 33715

**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: ALAN MOSSBERG

MGRM

07/13/2009

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