

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000037293

FILED
Feb 22, 2010
Secretary of State

Entity Name: TRIPLE S OF ALTAMONTE SPRINGS, LLC

Current Principal Place of Business:

302 HERMITS TRAIL
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

302 HERMITS TRAIL
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

PO BOX 150302
ALTAMONTE SPRINGS, FL 327150302

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WILDER, CHARLES D ESQ.
159 LOOKOUT PLACE, SUITE 101
MAITLAND, FL 32751 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: MGR
Name: WOLFRAM, STEPHEN W
Address: 302 HERMITS TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGR
Name: WOLFRAM, SHARRON B
Address: 302 HERMITS TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: STEPHEN W WOLFRAM MGR 02/22/2010

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