

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000049057

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** TRI-CORNERS VENTURES, LLC.

**Current Principal Place of Business:**

301 N. 25TH STREET  
FT. PIERCE, FL 34947

**New Principal Place of Business:**

**Current Mailing Address:**

10020 ORANGE AVE  
FT. PIERCE, FL 34945

**New Mailing Address:**

FEI Number: 27-0189872

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: ZOERHOF, TAMARA SUE  
Address: 10020 ORANGE AVE  
City-St-Zip: FT. PIERCE, FL 34945

Title: MGR  
Name: ZOERHOF, DAVID A MR  
Address: P.O. BOX 13422  
City-St-Zip: FORT PIERCE, FL 34979

Title: S  
Name: ZOERHOF, TAMARA SUE  
Address: 10020 ORANGE AVE  
City-St-Zip: FT. PIERCE, FL 34945

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: TAMARA SUE ZOERHOF

MRS

04/12/2012

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