

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000118487

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** TRINITY VMI, LLC

**Current Principal Place of Business:**

12220 STONELAKE RANCH BLVD  
THONOTOSASSA, FL 33592

**New Principal Place of Business:**

**Current Mailing Address:**

6152 DELANCEY STATION STREET  
105  
RIVERVIEW, FL 33578

**New Mailing Address:**

12220 STONELAKE RANCH BLVD.  
THONOTOSASSA, FL 33592

**FEI Number:** 27-1489046

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KILPATRICK, TIMOTHY B SR.  
6152 DELANCEY STATION STREET  
105  
RIVERVIEW, FL 33578 US

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

KILPATRICK, TIMOTHY B SR.  
12220 STONELAKE RANCH BLVD.  
THONOTOSASSA, FL 33592 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:** TIMOTHY KILPATRICK

03/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** KILPATRICK, TIMOTHY B SR.  
**Address:** 12220 STONELAKE RANCH BLVD.  
**City-St-Zip:** THONOTOSASSA, FL 33592

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:** TIMOTHY KILPATRICK

MGR

03/30/2010

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