

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000118829

**FILED**  
**Mar 08, 2010**  
**Secretary of State**

**Entity Name:** TRIDENT REAL ESTATE SERVICES, LLC

**Current Principal Place of Business:**

4505 TWIN CREST WAY  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

4505 TWIN CREST WAY  
TAMPA, FL 33624

**New Mailing Address:**

**FEI Number:** 27-1499522

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LANIGAN, J.D., DAVID C LL.M.  
DAVID LANIGAN, P.A.  
10937 NORTH 56TH STREET  
TAMPA, FL 336173000 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:** HEGARTY, ALTON  
**Address:** 4505 TWIN CREST WAY  
**City-St-Zip:** TAMPA, FL 33624

**Title:** MGR  
**Name:** SMITH, DERMOT  
**Address:** 11330 GRANDVILLE TERR.  
**City-St-Zip:** TEMPLE TERRACE, FL 33617

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:** ALTON HEGARTY

MGR

03/08/2010

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