

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000002996

**FILED**  
**Feb 12, 2011**  
**Secretary of State**

**Entity Name:** 3900 TRIOS LLC.

**Current Principal Place of Business:**

3900 CLARK ROAD  
SARASOTA, FL 34238

**New Principal Place of Business:**

1500 STICKNEY POINT RD  
SARASOTA, FL 34231

**Current Mailing Address:**

1500 STICKNEY POINT RD.  
SARASOTA, FL 34231

**New Mailing Address:**

**FEI Number:** 27-1628746      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NIKOLSON, MADELINE  
5100 FAR OAK CIRCLE  
SARASOTA, FL 34238      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:** MGRM  
**Name:** KAISER, ESTELLE  
**Address:** 7534 SWANSON LANE  
**City-St-Zip:** SARASOTA, FL 34231 US

**Title:** MGRM  
**Name:** KNOCKER, KARL  
**Address:** 11 STEPHENS COURT  
**City-St-Zip:** HAUPPAUGE, NY 11788 US

**Title:** MGRM  
**Name:** NIKOLSON, MADELINE  
**Address:** 5100 FAR OAK CIRCLE  
**City-St-Zip:** SARASOTA, FL 34238 US

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:** MADELINE NIKOLSON

MGRM

02/12/2011

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