

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000120450

FILED
Apr 30, 2011
Secretary of State

Entity Name: TRABORNE, LLC

Current Principal Place of Business:

3782 CEDAR HAMMOCK TRAIL
SAINT CLOUD, FL 34772 US

New Principal Place of Business:

Current Mailing Address:

3782 CEDAR HAMMOCK TRAIL
SAINT CLOUD, FL 34772 US

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLES, JOSEPH
3782 CEDAR HAMMOCK TRAIL
SAINT CLOUD, FL 34772 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: CHARLES, JOSEPH B MD,MPH,
Address: 3782 CEDAR HAMMOCK TRAIL
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: MGRM
Name: LOUIS, BOSNY P PHD
Address: 7112 MONTIBILLO PKWY
City-St-Zip: DURHAM, NC 27713

Title: MGRM
Name: PERCEVAL, PAUL MD
Address: 426 MISTY MEADOW DR.
City-St-Zip: OCOEE, FL 34761

Title: MGRM
Name: MALIAKAL, PIUS PHARM D
Address: 1939 REED HILL DR.
City-St-Zip: WINDERMERE, FL 34786 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: /S/JOSEPH CHARLES

MGRM

04/30/2011

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