

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000059966

FILED  
Feb 10, 2012  
Secretary of State

**Entity Name:** TRINITY SEPTIC SERVICES LLC

**Current Principal Place of Business:**

2744 OCEAN DRIVE A  
FERNANDINA BEACH, 32034

**New Principal Place of Business:**

2744 OCEAN DRIVE A  
FERNANDINA BEACH, FL 32034

**Current Mailing Address:**

PO BOX 16343  
FERNANDINA BEACH, 32035

**New Mailing Address:**

PO BOX 16343  
FERNANDINA BEACH, FL 32035

**FEI Number:** 26-3685217

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SEAGRAVES, PAMELA K  
2744 OCEAN DRIVE A  
FERNANDINA BEACH, FL 32034 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:** SEAGRAVES, JAMES N  
**Address:** 2744 OCEAN DRIVE A  
**City-St-Zip:** FERNANDINA BEACH, FL 323034

**Title:** MGR  
**Name:** SEAGRAVES, PAMELA K  
**Address:** 2744 OCEAN DRIVE A  
**City-St-Zip:** FERNANDINA BEACH, FL 32034

**Title:** MGR  
**Name:** SEAGRAVES, JAMES R  
**Address:** 2744 OCEAN DRIVE A  
**City-St-Zip:** FERNANDINA BEACH, FL 32034

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:** PAMELA SEAGRAVES

SECR

02/10/2012

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