

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L95000000085

1. Entity Name  
TROPHY LAKE PROPERTIES, L.C.



Principal Place of Business

1020 E. LAFAYETTE STREET  
SUITE 110  
TALLAHASSEE, FL 32301

Mailing Address

P.O. BOX 930  
TALLAHASSEE, FL 32302-0930

BK

FILED  
07 MAY -1 AM 9:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04302007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number

59-3302558

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BARRETT, DAVID A  
1020 E. LAFAYETTE STREET  
SUITE 110  
TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BARRETT, DAVID A
STREET ADDRESS	1020 E. LAFAYETTE STREET, SUITE 110
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	MGR
NAME	COOK, J. KINSON
STREET ADDRESS	1000 LIVE OAK PLANTATION RD
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

*David A. Barrett, mgr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

4/30/07

Daytime Phone #