2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2003 8:00 am
Secretary of State
04-01-2003 90032 009 ****50.00

DOCUMENT # L98000001975

1. Entity Name
T.R.T.E.N., L.L.C.

Principal Place of Business	Mailing Address
9840 INTERNATIONAL DRIVE ORLANDO FL 32819	9840 INTERNATIONAL DRIVE ORLANDO FL 32819

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3545708** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TOOHEY, GARRITT 9840 INTERNATIONAL DRIVE ORLANDO FL 32819 T.R.T.E.N., L.L.C.	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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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.

9840 INTERNATIONAL DRIVE
ORLANDO FL 32819

SIGNATURE _____ 9840 INTERNATIONAL DRIVE ORLANDO FL 32819
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOOHEY, FREDERICK W JR. 9840 INTERNATIONAL DRIVE ORLANDO FL 32819 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	59-3545708 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOOHEY, GARRITT 9840 INTERNATIONAL DRIVE ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED Derek Toohey (407)996-9840 3/11/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

00007649

CR2E083 (10/02)