

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001106

Entity Name: TREBOR EQ, LLC

FILED
Aug 28, 2007
Secretary of State

Current Principal Place of Business:

704 OVERLOOK TRAIL
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

704 OVERLOOK TRAIL
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 43-0962208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILLIAMS, ROBERT C
704 OVERLOOK TRAIL
PORT ORANGE, FL 32127 US

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 () Delete
Name: WILLIAMS, ROBERT C
Address: 704 OVERLOOK TRAIL
City-St-Zip: PORT ORANGE, FL 32127

Title: MGR () Delete
Name: JANS, RICHARD C
Address: 380 W. ALFRED STREET
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ROBERT WILLIAMS

MGR

08/28/2007

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