

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 10, 2007  
Secretary of State**

DOCUMENT# M05000002312

Entity Name: TRI-PRO MANAGEMENT, LLC

**Current Principal Place of Business:**

731 OBERLIN DRIVE  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

731 OBERLIN DRIVE  
CLEARWATER, FL 33765

**New Mailing Address:**

FEI Number: 20-2581902      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TROIANO, JOSEPH A ESQ  
8412 SOUTHWIND BAY CIRCLE  
FORT MYERS, FL 33908 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 ( ) Delete  
Name: BOWLES, GINA M  
Address: 9329 WAYNE BRIDGE ROAD  
City-St-Zip: LISBON, OH 44432

Title: MGRM ( ) Delete  
Name: SCHOOLER, LARRY A  
Address: 731 OBERLIN DRIVE  
City-St-Zip: CLEARWATER, FL 33765

**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 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: LARRY SCHOOLER

MGRM

04/10/2007

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