

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002312

FILED
Feb 04, 2009
Secretary of State

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:

12800 UNIVERSITY DRIVE
SUITE 380
FORT MYERS, FL 33907

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:

TROIANO, JOSEPH A ESQ
12800 UNIVERSITY DRIVE
SUITE 380
FORT MYERS, FL 33907 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: JOSEPH A TROIANO ESQ.

02/04/2009

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 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: JOSEPH A TROIANO ESQ

MGR

02/04/2009

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