

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# Z00328

Entity Name: TRI TEX, L.C.

FILED  
Jan 25, 2005  
Secretary of State

## Current Principal Place of Business:

436 17TH AVE NE  
SAINT PETERSBURG, FL 33704

## New Principal Place of Business:

246 9TH AVE NE  
SAINT PETERSBURG, FL 33701

## Current Mailing Address:

436 17 AVE. NE  
SAINT PETERSBURG, FL 33704

## New Mailing Address:

246 9TH AVE NE # 1  
SAINT PETERSBURG, FL 33701

FEI Number: 59-3067630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, MAGGIE  
436 17 AVE. N.E.  
SAINT PETERSBURG, FL 33704 US

## Name and Address of New Registered Agent:

MITCHELL, MAGGIE  
246 9TH AVE NE # 1  
SAINT PETERSBURG, FL 33701 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:

01/25/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: MITCHELL, KENT GARDNER  
Address: 436-17 AVE. N.E.  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: MGRM ( ) Delete  
Name: MITCHELL, MAGGIE  
Address: 436-17 AVE. N.E.  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: MGR ( ) Delete  
Name: MITCHELL, MICHAEL  
Address: 960 BAYVIEW PL. N.E.  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: MGRM ( ) Delete  
Name: GULBINE, COLLEEN  
Address: 2700 13 AVE. N.  
City-St-Zip: SAINT PETERSBURG, FL 33713

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MITCHELL, KENT GARDNER  
Address: 246 9TH AVE NE #1  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: MGRM (X) Change ( ) Addition  
Name: MITCHELL, MAGGIE  
Address: 246 9TH AVE NE # 1  
City-St-Zip: SAINT PETERSBURG, FL 33701

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 Section 119.07(3)(i), 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: COLLEEN GULBINE

MGRM

01/25/2005

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