

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000046282

**Entity Name:** TRT LLC

**Current Principal Place of Business:**

6038 WHISPERING TREES LANE  
PORT ORANGE, FL 32128

**Current Mailing Address:**

6038 WHISPERING TREES LANE  
PORT ORANGE, FL 32128

**FEI Number:** 20-8947698

**Certificate of Status Desired:** No

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

HELLER, KIM F  
374 SOUTH ATLANTIC AVENUE  
B1  
ORMOND BEACH, FL 32176 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

**Authorized Person(s) Detail :**

|                 |                            |                 |                            |
|-----------------|----------------------------|-----------------|----------------------------|
| Title           | MGRM                       | Title           | MGRM                       |
| Name            | THOMPSON, TIMOTHY E        | Name            | THOMPSON, HOPE E           |
| Address         | 6038 WHISPERING TREES LANE | Address         | 6038 WHISPERING TREES LANE |
| City-State-Zip: | PORT ORANGE FL 32128       | City-State-Zip: | PORT ORANGE FL 32128       |

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TIMOTHY E THOMPSON

MGR

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date