

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000008014

**Entity Name:** TRAD, LLC

**Current Principal Place of Business:**

117 N. SEMINOLE AV  
INVERNESS, FL 34450-4124

**Current Mailing Address:**

117 N SEMINOLE AVE  
INVERNESS, FL 34451-0583 US

**FEI Number:** 26-3828550

**Certificate of Status Desired:** No

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

BRADSHAW, WESLEY RESQ.  
209 COURTHOUSE SQUARE  
INVERNESS, FL 34450 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 MGR  
Name VAN ALLEN, LINDA MGR  
Address 117 N. SEMINOLE AVE  
City-State-Zip: INVERNESS FL 34450-4124

Title MGR  
Name VAN ALLEN, BRUCE ASST. MGR  
Address 117 N. SEMINOLE AVE  
City-State-Zip: INVERNESS FL 34450-4124

*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:** LINDA VANALLEN

**MANAGER**

**02/16/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date