

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000008014

**Entity Name:** TRAD, LLC

**Current Principal Place of Business:**

316 N. PINE AVE  
INVERNESS, FL 34450-4124

**Current Mailing Address:**

P.O. BOX 583  
INVERNESS, FL 34451-0583

**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 VANALLEN, F. BRUCE  
Address PO BOX 583  
City-State-Zip: INVERNESS FL 34451-0583

Title MGR  
Name VANALLEN, LINDA C  
Address PO BOX 583  
City-State-Zip: INVERNESS FL 34451-0583

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LINDA C. VANALLEN

**MANAGER**

**01/24/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date