

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000160109

**Entity Name:** TREMRON, LLC

**Current Principal Place of Business:**

2885 ST. CLAIR STREET  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

2885 ST. CLAIR STREET  
JACKSONVILLE, FL 32254

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CARON, HUGH  
2885 ST. CLAIR STREET  
JACKSONVILLE, FL 32254 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 CARON, HUGH  
Address 2885 ST. CLAIR STREET  
City-State-Zip: JACKSONVILLE FL 32254

Title MGR  
Name CARON, ERIC  
Address 2885 ST. CLAIR STREET  
City-State-Zip: JACKSONVILLE FL 32254

Title MGR  
Name CARON, MICHEL  
Address 2885 ST. CLAIR STREET  
City-State-Zip: JACKSONVILLE FL 32254

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:** HUGH CARON

**MANAGER**

**03/01/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date