

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000063854

**Entity Name:** TROMO, LLC

**Current Principal Place of Business:**

117 BAREFOOT CIRCLE  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

117 BAREFOOT CIRCLE  
BONITA SPRINGS, FL 34134

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HF REGISTERED AGENTS, LLC  
1715 MONROE STREET  
FORT MYERS, FL 33901 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 BIESANZ, JAMES T III  
Address 117 BAREFOOT CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34134

Title P, T  
Name BIESANZ, JAMES T III  
Address 117 BAREFOOT CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34134

Title VP  
Name BIESANZ, RORY E  
Address 117 BAREFOOT CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34134

Title S  
Name BIESANZ, MOLLY K  
Address 117 BAREFOOT CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34134

*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:** JAMES T BIESANZ, III

**MANAGER**

**04/30/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date