

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000026020

Entity Name: THOMLEE MANAGEMENT, LLC

Current Principal Place of Business:

541 MARY ESTHER CUTOFF
FORT WALTON BEACH, FL 32548

Current Mailing Address:

1245 BRIDGESTONE BLVD.
LAVERGNE, TN 37086

FEI Number: 46-2241226

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEE, ROBERT E
541 MARY ESTHER CUTOFF
FORT WALTON BEACH, FL 32548 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 MANAGER
Name LEE, ROBERT E
Address 541 MARY ESTHER CUTOFF
City-State-Zip: FORT WALTON BEACH FL 32548

Title MANAGER
Name YOUNG, FRANK
Address 1245 BRIDGESTONE BLVD.
City-State-Zip: LAVERGNE TN 37086

Title MANAGER
Name THOMPSON, DEWITT C V
Address 1245 BRIDGESTONE BLVD.
City-State-Zip: LAVERGNE TN 37086

Title AUTHORIZED REPRESENTATIVE
Name ODEN, RANDALL A
Address 1245 BRIDGESTONE BLVD.
City-State-Zip: LAVERGNE TN 37086

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: RANDALL ODEN

CONTROLLER

05/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date