

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000000915

Entity Name: THORPE HOLDINGS, LLC

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

365 TAFT VINELAND ROAD  
SUITE 105  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

365 TAFT VINELAND ROAD  
SUITE 105  
ORLANDO, FL 32824

**New Mailing Address:**

FEI Number: 59-3634478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHALIFOUX, DEBBE R  
365 TAFT VINELAND RD STE 105  
ORLANDO, FL 32824 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: RUSSELL, JOHN H TR  
Address: 365 TAFT VINELAND RD #105  
City-St-Zip: ORLANDO, FL 32824

Title: MGRM  
Name: MADISON, PETER D  
Address: 4908 OAK ISLAND RD.  
City-St-Zip: ORLANDO, FL 32809

Title: MGR  
Name: CHALIFOUX, DEBBIE R  
Address: 6105 LAKE LIZZIE DR.  
City-St-Zip: SAINT CLOUD, FL 34771

Title: MGRM  
Name: MADISON, BEVERLY B  
Address: 6545 CAY CIRCLE  
City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information indicated on this 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.

SIGNATURE: DEBBE R. CHALIFOUX

MGR

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date