

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 10, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000009453

1. Entity Name
THISTLE PROPERTIES LLC



Principal Place of Business
**200 SOUTH ORANGE AVENUE, SUITE 2600
ORLANDO, FL 32801**

Mailing Address
**200 SOUTH ORANGE AVENUE, SUITE 2600
ORLANDO, FL 32801**



01262004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FCI Number
59-3679236

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**INTRASTATE REGISTERED AGENT CORP.
200 SOUTH ORANGE AVENUE, SUITE 2600
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when renating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME THOMSON, MARGARET
STREET ADDRESS 10 HUNTING LODGE GARDENS
CITY- ST- ZIP HAMILTON ML3 7EB
SCOTLAND, UK UK

TITLE MGR
NAME DALZIEL, JOHN
STREET ADDRESS 8400 KEMPER LANE
CITY- ST- ZIP WINDERMERE, FL 34786

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

U00000159641
05/10/04-80040-008 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

Margaret Thomson **MARGARET THOMSON**

4/14/04

0114416982854

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #