

FILED
Jul 19, 2004 08:00 AM
Secretary of State

1. Entity Name
THOMPSON ESTUARY, LLC



Mailing Address
2721 BUCKTHORN WAY
NAPLES, FL 34105

DO NOT WRITE IN THIS SPACE



CF2E083 (10/03)

Applied For
Not Applicable

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BDB AGNET CO.
2500 N. MILITARY TRAIL, STE. 480
BOCA RATON, FL 33431

**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 reinstalling)

DATE _____

Filing Fee is \$50.00
Due by September 8, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	THOMPSON, JOHN M III
STREET ADDRESS	2721 BUCKHORN WAY
CITY-ST-ZIP	NAPLES, FL 34105

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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STREET ADDRESS
CITY-ST-ZIP

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:

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

Date _____

Daytime Phone # _____