

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009320

FILED  
Apr 12, 2005  
Secretary of State

**Entity Name:** THOMPSON INVESTMENT ENTERPRISES, LLC

**Current Principal Place of Business:**

C/O JACK A. THOMPSON  
223 BAYFRONT DR  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

C/O JACK A. THOMPSON  
26868 HICKORY BLVD  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

C/O JACK A. THOMPSON  
223 BAYFRONT DR  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

C/O JACK A. THOMPSON  
26868 HICKORY BLVD  
BONITA SPRINGS, FL 34134

**FEI Number:** 59-3724279

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLASP INC  
C/O CUMMINGS & LOCKWOOD  
3001 TAMiami TRAIL N 4TH FL  
NAPLES, FL 34103 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: THOMPSON, JACK A  
Address: 223 BAYFRONT DR  
City-St-Zip: BONITA SPRINGS, FL 34134

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: THOMPSON, JACK A  
Address: 26868 HICKORY BLVD  
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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:** JACK A THOMPSON

MGR

04/12/2005

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