

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011145

FILED  
Jan 07, 2004  
Secretary of State

**Entity Name:** THAC, LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

2963 GULF-TO-BAY BLVD., SUITE 265  
CLEARWATER, FL 33759

**New Principal Place of Business:**

**Current Mailing Address:**

2963 GULF-TO-BAY BLVD., SUITE 265  
CLEARWATER, FL 33759

**New Mailing Address:**

**FEI Number:** 61-1405877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARLAN, BRUCE M ESQ.  
29296 U.S. 19 N. STE. 202  
CLEARWATER, FL 33761 US

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

HARLAN, BRUCE M ESQ.  
2963 GULF TO BAY BOULEVARD  
SUITE 265  
CLEARWATER, FL 33759 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:

01/07/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: HALL, MICHAEL B  
Address: 2963 GULF-TO-BAY BLVD., SUITE 265  
City-St-Zip: CLEARWATER, FL 33759

Title: MGRM ( ) Delete  
Name: TURINO, JEFFREY G  
Address: 2963 GULF-TO-BAY BLVD., SUITE 265  
City-St-Zip: CLEARWATER, FL 33759

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL B HALL

MGRM

01/07/2004

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