2004 LIMITED LIABILITY COMPANY ____ ANNUAL REPORT

DOCUMENT # L01000019274

1. Exity Name THORNY PROPERTIES LLC



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

Principal Place of Business

700 11TH ST S

PH #2

NAPLES, FL 34102

Mailing Address

700 11TH ST S

PH #2

NAPLES, FL 34102

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DO NOT WRITE IN THIS SPACE

01002004110 Ong LLO	01122000 (10/00)		
. FEI Number		Applied For	
59-3757392		Not Applicable	
5. Certificate of Status Desired		\$5.00 Additional Fee Required	

CDOEGGO (+A)AO)

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan ions of registered agent	ging its registered office or registered agent, or both, in the State of	Florida. I am familiar with, and accept
SIGNATURE_	Signeture, typed or printed name of registered agent and title if applicable	(NOYE Registered Agent signature required when retristating)	DATE
Fi	lling Fee is \$50.00 ue by May 1, 2004	90001	00083709 4-80050-012 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE MAINE STREET ADDRESS CITY-ST-ZP	MGR TYRELL, THOMAS H 700 11TH STREET SOUTH, PH-II NAPLES, FL 34102		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-51-ZIP		DO NOT \	WRITE
TITLE NAME STREET ADDRESS CTTY-ST-ZIP		IN THIS S	SPACE
TITLE NAME STREET ACCRESS CITY-SI-ZIP			
TITLE NAME STREET ADDRESS CHY-SI-DP			
11. I hereby a indicated limited lia	certify that the information superiod with this filling does not or on this report is true and accurate and that my signature sha billity company or the receiver or trustee empowered to exec	uality for the exemption stated in Section 119.07(3)(f), Florida Statute all have the same legal effect as if made under cath, that I am a ma ute this rapport as refluired by Chapter 608, Florida Statutes.	es I further certify that the information naging member or manager of the

ER, DR ANTENNIZED REPRESENTATIVE