

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000016577

1. Entity Name
THOMSON LIMITED, LLC.



Principal Place of Business
**4415 GINNY DR
LAKELAND, FL 33811**

Mailing Address
**4415 GINNY DR
LAKELAND, FL 33811**



01212007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
33-1061863

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**THOMSON, GERALD
4415 GINNY DRIVE
LAKELAND, FL 33811-1412**

**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 GERALD THOMSON
Signature, typed or printed name of registered agent and title if applicable.

Gerald Thomson
(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000729237
05/08/07-80027-024 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
THOMSON, GERALD
4415 GINNY DR
LAKELAND, FL 33811**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
THOMSON, LINDA
4415 GINNY DR
LAKELAND, FL 33811**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Gerald Thomson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-27-07

Date

912-427-0862

Daytime Phone #