

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000002088

**FILED**  
**Apr 28, 2004**  
**Secretary of State**

**Entity Name:** THOROUGHbred HOSPITALITY, LLC

**Current Principal Place of Business:**

3105 N.E. SILVER SPRINGS BLVD.  
OCALA, FL 34470

**New Principal Place of Business:**

13605 SE 93RD AVENUE ROAD  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

3105 N.E. SILVER SPRINGS BLVD.  
OCALA, FL 34470

**New Mailing Address:**

**FEI Number:** 82-0583297

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TROW, CHESTER J  
1 N.E. FIRST AVENUE, SUITE 303  
OCALA, FL 34470 US

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

DEPASQUALE, KENNETH R  
3105 NE SILVER SPRINGS BLVD  
OCALA, FL 34471 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: KENNETH R DEPASQUALE

04/28/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: DEPASQUALE, KENNETH R  
Address: 3105 N.E. SILVER SPRINGS BLVD.  
City-St-Zip: Ocala, FL 34470

**ADDITIONS/CHANGES:**

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: KENNETH R DEPASQUALE

MGR

04/28/2004

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