

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Mar 22, 2006 08:00 A  
Secretary of State**

**DOCUMENT # L03000003983**

1. Entity Name

INDUSTRIAL REALTY INVESTMENTS, LLC



Principal Place of Business

2232 CYPRESS HOLLOW COURT  
SAFETY HARBOR, FL 34695

Mailing Address

2232 CYPRESS HOLLOW COURT  
SAFETY HARBOR, FL 34695



03192006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DOUGLAS L. HILKERT P.A.  
2557 NURSERY ROAD SUITE A  
CLEARWATER, FL 33764

**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 \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

000000477577  
04/06/06-80056-021 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME THOMAS, DERON L  
STREET ADDRESS 2232 CYPRESS HOLLOW COURT  
CITY-ST-ZIP SAFETY HARBOR, FL 34695

TITLE MGRM  
NAME THOMAS, DAWN N  
STREET ADDRESS 2232 CYPRESS HOLLOW COURT  
CITY-ST-ZIP SAFETY HARBOR, FL 34695

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
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:** *Deron L. Thomas* Deron L. Thomas

3/19/2006 727-724-3300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #