

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008528

FILED
Apr 19, 2005
Secretary of State

Entity Name: THOMAS INSURANCE & FINANCIAL SERVICES, LLC.

Current Principal Place of Business:

1600 SOUTH FEDERAL HIGHWAY
SUITE 450
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1600 SOUTH FEDERAL HIGHWAY
SUITE 450
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 13-4242119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, BRETT A
1600 SOUTH FEDERAL HIGHWAY SUITE 450
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: THOMAS, BRETT A
Address: 1600 SOUTH FEDERAL HWY
City-St-Zip: POMPANO BEACH, FL 33062

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: BRETT THOMAS

MR

04/19/2005

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