## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## May 04, 2005 08:00 AM Secretary of State DOCUMENT # L03000044305 1. Entity Name THOMPSON MANAGEMENT, L.L.C. Principal Place of Business Mailing Address 6465 4TH STREET VERO BEACH, FL 32968 6465 4TH STREET VERO BEACH, FL 32968 05022005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2417210 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FENNELL, TODD W ESQ. DO NOT WRITE C/O GOULD, COOKSEY, ET AL 979 BEACHLAND BLVD. IN THIS SPACE VERO BEACH, FL 32963-1688 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. (am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registreed Agent signature required when reinstalled) Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM POTEAT, RUSSELL NAME STREET ADDRESS 6465 4TH STREET CITY-ST-ZIP VERO BEACH, FL 32968 TITLE ,100000362584 /DS/DS-80123-015 55.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME SYRIET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 it made under oath; that I am a managing member or manager of the limited liability company or the receives or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING HEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED** 

Daytime Phone #