


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000057450 1. Entity Name THOMAS MAJOR LLC		
Principal Place of Business 21860 NE 130 CT RD FORT MCCOY, FL 32134 US		Mailing Address 21860 NE 130 CT RD FORT MCCOY, FL 32134 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MAJOR, THOMAS W 21860 NE 130 CT RD FORT MCCOY, FL 32134		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: _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE: _____		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MAJOR, THOMAS W OWNER 21860 NE 130 CT RD FT. MCCOY, FL 32134	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: Thomas Major Thomas Major 4/11/05 352-5462124 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> Date Daytime Phone #		



02212005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
20-0536661

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

000000303213
04/13/05-80102-018 50.00

**DO NOT WRITE
IN THIS SPACE**