

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040541

FILED
Apr 23, 2008
Secretary of State

Entity Name: THOMAS DRIVE BEACH HOLDINGS, LLC

Current Principal Place of Business:

344 W. TURKEYFOOT LAKE ROAD
AKRON, OH 44319

New Principal Place of Business:

3730 TABS DRIVE
SUITE 4
UNIONTOWN, OH 44685

Current Mailing Address:

344 W. TURKEYFOOT LAKE ROAD
AKRON, OH 44319

New Mailing Address:

3730 TABS DRIVE
SUITE 4
UNIONTOWN, OH 44685

FEI Number: 20-1204018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSSI, DAN
344 BROOKS STREET
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

RUNNELS, DAVAGE J III
4399 COMMONS DRIVE EAST
SUITE 300
DESTIN, FL 32541 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: DAVAGE J RUNNELS III

04/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ROSSI, DAN
Address: 344 BROOKS STREET
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MEMB (X) Change () Addition
Name: HARVEY, TIMOTHY
Address: 3730 TABS DRIVE, SUITE 4
City-St-Zip: UNIONTOWN, OH 44685

Title: MEMB () Change (X) Addition
Name: TUCKER, ROBERT M
Address: 3730 TABS DRIVE, SUITE 4
City-St-Zip: UNIONTOWN, OH 44685

Title: MEMB () Change (X) Addition
Name: DP ROSSI INVESTMENTS,
Address: 623 CALHOUN AVENUE
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TIMOTHY HARVEY

MEMB

04/23/2008

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