

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000047352

FILED  
Jul 08, 2007  
Secretary of State

**Entity Name:** ROSS THOMPSON SERVICES, LLC

**Current Principal Place of Business:**

34 ROBINWOOD DRIVE NW  
FT WALTON BEACH, FL 32548 US

**New Principal Place of Business:**

**Current Mailing Address:**

34 ROBINWOOD DRIVE NW  
FT WALTON BEACH, FL 32548 US

**New Mailing Address:**

FEI Number: 20-1274230      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

THOMPSON, ROSS M  
34 ROBINWOOD DRIVE NW  
FT WALTON BEACH, FL 32548 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THOMPSON, ROSS M  
Address: 34 ROBINWOOD DRIVE NW  
City-St-Zip: FT WALTON BEACH, FL 32548 US

Title: MGRM ( ) Delete  
Name: MORRISON, RYAN B  
Address: 211 COUNTRY CLUB DRIVE  
City-St-Zip: SHALIMAR, FL 32579

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROSS M. THOMPSON

MGRM

07/08/2007

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