

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000088716

Entity Name: PAUL G. THOMAS, LLC

FILED  
Jan 19, 2006  
Secretary of State

## Current Principal Place of Business:

3130 NOAH COURT  
DELTONA, FL 32738 US

## New Principal Place of Business:

## Current Mailing Address:

3130 NOAH COURT  
DELTONA, FL 32738 US

## New Mailing Address:

FEI Number: 33-1106636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, PAUL G  
3130 NOAH COURT  
DELTONA, FL 32738 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/MANAGERS:

Title: MGR ( ) Delete  
Name: THOMAS, PAUL G  
Address: 3130 NOAH COURT  
City-St-Zip: DELTONA, FL 32738 US

Title: MGRM ( ) Delete  
Name: SMITH, MICHAEL  
Address: 3291 BUCKLAND ST  
City-St-Zip: DELTONA, FL 32738

Title: MGRM (X) Delete  
Name: COCHRANE, EDWARD M JR  
Address: 144 DELEON RD  
City-St-Zip: DEBARY, FL 32713 US

## ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition  
Name: COCHRANE, EDWARD M JR  
Address: 144 DELEON RD  
City-St-Zip: DEBARY, FL 32713 US

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 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: PAUL THOMAS

MGR

01/19/2006

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