

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034097

FILED  
May 01, 2007  
Secretary of State

Entity Name: THORN BEACH HOLDINGS, LLC

**Current Principal Place of Business:**

100 S. ASHLEY DRIVE  
SUITE 1500  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2481  
TAMPA, FL 33601

**New Mailing Address:**

FEI Number: 20-2634467      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:**

THORN, W. THOMPSON III  
100 S. ASHLEY DRIVE  
SUITE 1500  
TAMPA, FL 33602 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: THORN, W. THOMPSON III  
Address: 100 S. ASHLEY DRIVE, SUITE 1500  
City-St-Zip: TAMPA, FL 33602

Title: MGRM ( ) Delete  
Name: THORN, MARTHA H  
Address: 100 S. ASHLEY DRIVE, SUITE 1500  
City-St-Zip: TAMPA, FL 33602

Title: M ( ) Delete  
Name: THORN, WRAY T IV  
Address: 100 S. ASHLEY DRIVE, SUITE 1500  
City-St-Zip: TAMPA, FL 33602

Title: M ( ) Delete  
Name: THORN, MELISSA F  
Address: 100 S. ASHLEY DRIVE, SUITE 1500  
City-St-Zip: TAMPA, FL 33602

**ADDITIONS/CHANGES:**

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

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

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: W. THOMPSON THORN, III

MGRM

05/01/2007

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