

ANNUAL REPORT**FILED****Apr 05, 2007 0**
Secretary of**DOCUMENT # L05000062717**1. Entity Name
THOMAS DRIVE PROPERTIES LLC

Principal Place of Business

**5700 THOMAS DRIVE
CINCINNATI, OH 45249 US**

Mailing Address

**PO BOX 498249
CINCINNATI, OH 45249 US**

03302007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE4. FEI Number
20-3223367Applied For
Not Applicable5. Certificate of Status Desired ☐**\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**DELORIEA, JEANIE
5700 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408****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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BRADBURY, KEN
STREET ADDRESS	PO BOX 498249
CITY-STATE-ZIP	CINCINNATI, OH 45249

TITLE	
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U000000690491
04/11/07-80080-014 50.00**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 606, Florida Statutes.

SIGNATURE: K W Bradbury

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/30/07

Date

Daytime Phone # _____