

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000092561

Entity Name: THOMAS BAUMAN LLC

**FILED**  
**Jul 20, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

23605 NE 117TH CT. RD  
ORANGE SPRINGS, FL 32183

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 261  
ORANGE SPRINGS, FL 32182

**New Mailing Address:**

FEI Number: 39-3700757      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

SOLOGUREN, GEORGE  
3501 NE 10 ST  
OCALA, FL 34470      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: MGRM      ( ) Delete  
Name: BAUMAN, THOMAS  
Address: 23605 NE 117TH CT. RD  
City-St-Zip: ORANGE SPRINGS, FL 32183

**ADDITIONS/CHANGES:**

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: THOMAS BAUMAN

MGRM

07/20/2007

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