

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108448

Entity Name: THOMPSON JV, LLC

FILED  
Jan 19, 2006  
Secretary of State

**Current Principal Place of Business:**

829 EASTVIEW AVENUE  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

25 EAST WALL STREET  
FROSTPROOF, FL 33843

**Current Mailing Address:**

P.O. BOX 14818  
FORT LAUDERDALE, FL 33302 US

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

URBAN CORE DEVELOPMENT, LC  
829 EASTVIEW AVENUE  
DELRAY BEACH, FL 33483 US

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

URBAN CORE DEVELOPMENT, LC  
101 SE 15TH AVENUE  
UNIT E  
FORT LAUDERDALE, FL 33301 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: AARON NEWMAN

01/19/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ORANGE BEND, LLC,  
Address: PO BOX 14818  
City-St-Zip: FORT LAUDERDALE, FL 33302

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ORANGE BEND JV, LLC,  
Address: PO BOX 14818  
City-St-Zip: FORT LAUDERDALE, FL 33302

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: AARON NEWMAN

MGRM

01/19/2006

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