


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 21, 2008 8:00 am
Secretary of State

05-21-2008 90205 034 ***138.75

DOCUMENT # L06000038045 1. Entity Name THOMASON, LLC	
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Principal Place of Business 12001 CORY LAKE BLVD TAMPA, FL 33647	Mailing Address 12001 CORY LAKE BLVD 10335 CROSS CREEK BLVD TAMPA, FL 33647 #25
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DO NOT WRITE IN THIS SPACE



04102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4672419	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

**BROWNLEE, HUNTER J
FOWLER WHITE BOGGS BANKER P.A.
501 E. KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THOMASON, EUGENE E 12001 CORY LAKE BLVD TAMPA, FL 33647
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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 608, Florida Statutes.

SIGNATURE:  **EUGENE E. THOMASON** **4/18/08** **813/994-8515**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #