## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053340

Entity Name: THORN LAWRENCE, P.L.

FILED Jan 15, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

402 EAST OAK AVENUE SUITE 101 TAMPA, FL 33602

**New Mailing Address: Current Mailing Address:** 

402 EAST OAK AVENUE SUITE 101 TAMPA, FL 33602 US

FEI Number: 20-4981504 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

THORN, ERIC M LAWRENCE, MARCUS S JR 402 EAST OAK AVENUE 402 EAST OÁK AVENUE SUITE 101 SUITE 101 TAMPA, FL 33602 US 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: MARCUS S. LAWRENCE, JR. 01/15/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change ( ) Addition

THORN, ERIC M ERIC, THORN M Name: Name:

Address: 402 EAST OAK AVENUE, SUITE 101 Address: 402 EAST OAK AVENUE, SUITE 101 TAMPA, FL 33602 US TAMPA, FL 33602 US

City-St-Zip: City-St-Zip:

Title: MGR Title: () Change () Addition ( ) Delete

LAWRENCE, MARCUS S JR. Name: Name: Address: 402 EAST OAK AVENUE, SUITE 101 Address: City-St-Zip: TAMPA, FL 33602 US 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: MARCUS S. LAWRENCE, JR. 01/15/2009