

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000057807

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** THE THOMAS FAMILY ENTERPRISES "LLC"

**Current Principal Place of Business:**

13743 LINDEN DRIVE  
SPRING HILL, FL 34609 US

**New Principal Place of Business:**

19370 OLIVER STREET  
BROOKSVILLE, FL 34601 US

**Current Mailing Address:**

1593 FAYETTEVILLE DRIVE  
SPRING HILL, FL 34609 US

**New Mailing Address:**

**FEI Number:** 01-0868164      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

THOMAS, CURTIS D  
1593 FAYETTEVILLE DRIVE  
SPRING HILL, FL 34609 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  
**Name:** THOMAS, EMILY K  
**Address:** 1593 FAYETTEVILLE DRIVE  
**City-St-Zip:** SPRING HILL, FL 34609 US

**Title:** MRGM  
**Name:** THOMAS, CURTIS D  
**Address:** 1593 FAYETTEVILLE DRIVE  
**City-St-Zip:** SPRING HILL, FL 34609 US

**Title:** MGRM  
**Name:** THOMAS, ACHILLES  
**Address:** 2240 GOLD ROAD  
**City-St-Zip:** SPRINGHILL, FL 34609 US

I hereby 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: EMILY K. THOMAS

MGRM

04/26/2011

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