

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059762

FILED
Aug 25, 2008
Secretary of State

Entity Name: THS BUSINESS CENTER, LLC

Current Principal Place of Business:

2075 INDUSTRIAL PARK ROAD
MULBERRY, FL 33860 US

New Principal Place of Business:

Current Mailing Address:

7640 INVESTMENT COURT
UNIT A
OWINGS, MD 20736 US

New Mailing Address:

FEI Number: 20-5041073 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

CLAYTON, TAYLOR W
2075 INDUSTRIAL PARK ROAD
MULBERRY, FL 33860 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TAYLOR, CLAYTON W
Address: 7640 INVESTMENT COURT, UNIT A
City-St-Zip: OWINGS, MD 20736

Title: MGRM () Delete
Name: NEUSTADT, BRUCE D
Address: 104 LEE RD
City-St-Zip: MANAHAWKIN, NJ 08050

Title: CFO () Delete
Name: HOWE, BRANT R
Address: 7640 INVESTMENT ST UNIT A
City-St-Zip: OWINGS, MD 20736

Title: CPA () Delete
Name: HOWE, BRANT R
Address: 7640 INVESTMENT CT UNIT A
City-St-Zip: OWINGS, MD 20736

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRANT HOWE

CFO

08/25/2008

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