

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000066447

**FILED**  
**Feb 14, 2007**  
**Secretary of State**

**Entity Name:** BLACK THORN, LLC

**Current Principal Place of Business:**

4747 PROGRESS AVENUE  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

4747 PROGRESS AVENUE  
NAPLES, FL 34104 US

**New Mailing Address:**

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

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

CLASP, INC.  
3001 TAMiami TRAIL N.  
4TH FLOOR  
NAPLES, FL 34103 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 ( ) Delete  
Name: MCNAMARA, EDWARD P  
Address: 4747 PROGRESS AVENUE  
City-St-Zip: NAPLES, FL 34104 US

**ADDITIONS/CHANGES:**

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

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: EDWARD P. MCNAMARA

MGRM

02/14/2007

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