

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000070960

**FILED**  
**Apr 24, 2009**  
**Secretary of State**

**Entity Name:** RICHARD DODGE THOMPSON LLC

**Current Principal Place of Business:**

4733 S. E. DRYFUS AVENUE  
STUART, FL 34997 US

**New Principal Place of Business:**

1911 JUNO ROAD  
NORTH PALM BEACH, FL 33408 US

**Current Mailing Address:**

4733 S. E. DRYFUS AVENUE  
STUART, FL 34997 US

**New Mailing Address:**

1911 JUNO ROAD  
NORTH PALM BEACH, FL 33408 US

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

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

THOMPSON, RICHARD D SR.  
4733 S. E. DRYFUS AVENUE  
STUART, FL 34997 US

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

THOMPSON, RICHARD D SR.  
1911 JUNO ROAD  
NORTH PALM BEACH, FL 33408 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: RICHARD D. THOMPSON

04/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THOMPSON, RICHARD D SR.  
Address: 4733 S. E. DRYFUS AVENUE  
City-St-Zip: STUART, FL 34997 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: THOMPSON, RICHARD D SR.  
Address: 1911 JUNO ROAD  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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: RICHARD D. THOMPSON

MGRM

04/24/2009

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