

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093510

FILED
Jul 07, 2008
Secretary of State

Entity Name: HUMPHREY THAMES OUTDOOR (HTO), LLC

Current Principal Place of Business:

10618 NW CR 274
ALTHA, FL 32421

New Principal Place of Business:

Current Mailing Address:

10618 NW CR 274
ALTHA, FL 32421

New Mailing Address:

FEI Number: 26-0891343 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:

HUMPHREY, JAMES M
10618 NW CR 274
ALTHA, FL 32421 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: THAMES, CLIFF M
Address: 10618 NW CR 274
City-St-Zip: ALTHA, FL 32421

Title: MGRM () Delete
Name: HUMPHREY, CHRISTOPHER R
Address: 10618 NW CR 274
City-St-Zip: ALTHA, FL 32421

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HUMPHREY, JAMES M
Address: 10618 NW CR 274
City-St-Zip: ALTHA, FL 32421

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

Title: MGRM () Change (X) Addition
Name: THAMES, CLIFF M
Address: 10618 NW CR 274
City-St-Zip: ALTHA, FL 32421

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: JAMES M. HUMPHREY

MGRM

07/07/2008

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