

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000032602

Entity Name: THOMAS SZOKE LLC

**FILED**  
**Apr 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

921 PARKSIDE POINTE BLVD  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

921 PARKSIDE POINTE BLVD  
APOPKA, FL 32712

**New Mailing Address:**

FEI Number: 26-2278603

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMK ACCOUNTING SERVICES  
274 WILSHIRE BLVD  
220  
CASSELBERRY, FL 32707 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: MGR  
Name: SZOKE, THOMAS R  
Address: 921 PARKSIDE POINTE BLVD.  
City-St-Zip: APOPKA, FL 32712

Title: MGR  
Name: OZOLA-SZOKE, GINTA  
Address: 921 PARKSIDE POINTE BLVD  
City-St-Zip: APOPKA, FL 32712

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: THOMAS R SZOKE

MGR

04/03/2010

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