

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041590

FILED
Jun 02, 2009
Secretary of State

Entity Name: THOMAS RECREATION & MUSIC PARK, LLC

Current Principal Place of Business:

8605 SE GULFSTREAM PLACE
HOBE SOUND, FL 33455 US

New Principal Place of Business:

8724 SE PINEHAVEN AVE
HOBE SOUND, FL 33455 US

Current Mailing Address:

8605 SE GULFSTREAM PLACE
HOBE SOUND, FL 33455 US

New Mailing Address:

8724 SE PINEHAVEN AVE
HOBE SOUND, FL 33455 US

FEI Number: 74-3258508 **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:

THOMAS, LARRY A II
8605 SE GULFSTREAM PLACE
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

THOMAS, LARRY A II
8724 SE PINEHAVEN AVE
HOBE SOUND, FL 33455 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:

06/02/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: THOMAS, LARRY A II
Address: 8605 SE GULFSTREAM PLACE
City-St-Zip: HOBE SOUND, FL 33455 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: THOMAS, LARRY A II
Address: 8724 SE PINEHAVEN AVE
City-St-Zip: HOBE SOUND, FL 33455 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: LARRY THOMAS

PRES

06/02/2009

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