

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000052124

Entity Name: FERLITA-THOMPSON, LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7 RIBERIA ST  
ST AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

7 RIBERIA ST  
ST AUGUSTINE, FL 32084

**New Mailing Address:**

FEI Number: 59-2746717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMPSON, EVELYN E MGRM  
7 RIBERIA ST  
ST AUGUSTINE, FL 32084 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  
Name: THOMPSON, EVELYN E TRUSTEE  
Address: 7 RIBERIA ST  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: MGRM  
Name: FERLITA, THERESA A  
Address: 3810 N. OAK DRIVE, #N-31  
City-St-Zip: TAMPA, FL 33611

Title: MGRM  
Name: THOMPSON, SCOTT L  
Address: 11 ARENTA STREET  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRM  
Name: THOMPSON, BRIAN L  
Address: 61 SANFORD STREET  
City-St-Zip: ST. AUGUSTINE, FL 32084

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: EVELYN E THOMPSON

MGRM

01/04/2012

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