

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000081601

**Entity Name:** THOMAS FRANKLIN LLC

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

12900 E TRAILS END RD  
FLORAL CITY, FL 34436

**New Principal Place of Business:**

12486 E WALTON DR  
FLORAL CITY, FL 34436

**Current Mailing Address:**

12900 E TRAILS END RD  
FLORAL CITY, FL 34436

**New Mailing Address:**

12486 E WALTON DR  
FLORAL CITY, FL 34436

**FEI Number:** 26-3231127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, HUGH E  
1339 N CARNEVALE TER  
LECANTO, FL 34461 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: FRANKLIN, THOMAS A  
Address: 12486 E WALTON DR  
City-St-Zip: FLORAL CITY, FL 34436

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 FRANKLIN

MGR

04/27/2012

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