

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000100859

**Entity Name:** THORNE HERNANDO, LLC

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4356 OUTRIGGER LN  
TAMPA, FL 336155510

**New Principal Place of Business:**

**Current Mailing Address:**

4356 OUTRIGGER LN  
TAMPA, FL 336155510

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

THORNE, THERESA J  
4356 OUTRIGGER LN  
TAMPA, FL 336155510 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: THORNE, JOHN A  
Address: 4356 OUTRIGGER LN  
City-St-Zip: TAMPA, FL 336155510

Title: MGR  
Name: THORNE, THERESA J  
Address: 4356 OUTRIGGER LN  
City-St-Zip: TAMPA, FL 336155510

Title: MGR  
Name: HARVEY, ANGELA M  
Address: 2116 GOLF MANOR BLVD  
City-St-Zip: VALRICO, FL 33596

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: JOHN A THORNE

MGR

01/05/2010

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