

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000095216

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Entity Name:** TRUE POINT LLC

**Current Principal Place of Business:**

206 EAST PINE ST.  
LAKELAND, FL 33801

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 442  
HIGHLAND CITY, FL 33846

**New Mailing Address:**

**FEI Number:** 27-1550349

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THURMOND, PATRICK  
206 EAST PINE ST.  
LAKELAND, FL 33801 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: THURMOND, PATRICK  
Address: P.O. BOX 442  
City-St-Zip: HIGHLAND CITY, FL 33846

Title: MGRM  
Name: THURMOND, GLENDA  
Address: P.O. BOX 442  
City-St-Zip: HIGHLAND CITY, FL 33846

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: PATRICK B THURMOND

MGR

04/12/2010

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