

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000048328

Entity Name: THOMAS MAXUS, LLC

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4141 BAY BEACH LANE, UNIT 4H5  
FT. MYERS BEACH, FL 33931

**New Principal Place of Business:**

4141 BAY BEACH LANE, UNIT 4H5  
FT. MYERS BEACH, FL 33931 US

**Current Mailing Address:**

4141 BAY BEACH LANE, UNIT 4H5  
FT. MYERS BEACH, FL 33931

**New Mailing Address:**

4141 BAY BEACH LANE, UNIT 4H5  
FT. MYERS BEACH, FL 33931 US

FEI Number: 27-2692170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EARL, SCOTT T  
4141 BAY BEACH LANE, UNIT 4H5  
FT. MYERS BEACH, FL 33931 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: EARL, SCOTT T  
Address: 4141 BAY BEACH LANE, UNIT 4H5  
City-St-Zip: FT. MYERS BEACH, FL 33931

Title: MGR  
Name: NOVAK, MICHAEL J  
Address: 3 CLINTON SQUARE  
City-St-Zip: ALBANY, NY 12207 US

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: MICHAEL J NOVAK

MGR

04/22/2011

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