

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000117082

Entity Name: NAREEN THOMPSON LLC

**FILED**  
**Mar 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2780 E FOWLER AVE, STE 247  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

2780 E FOWLER AVE, STE 247  
TAMPA, FL 33612

**New Mailing Address:**

FEI Number: 90-0547381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BECTON, CRAIG  
2780 E FOWLER AVE, STE 247  
TAMPA, FL 33612 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, NAREEN  
Address: 2780 E FOWLER AVE, STE 247  
City-St-Zip: TAMPA, FL 33612

Title: MGRM  
Name: DAVIDS, MARVA  
Address: 2780 E FOWLER AVE, STE 247  
City-St-Zip: TAMPA, FL 33612

Title: MGRM  
Name: JOHNSON, NAMOI  
Address: 2780 E FOWLER AVE, STE 247  
City-St-Zip: TAMPA, FL 33612

Title: MGRM  
Name: BRYAN, NICOLE  
Address: 2780 E FOWLER AVE, STE 247  
City-St-Zip: TAMPA, FL 33612

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: NAREEN THOMPSON

MISS

03/26/2011

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