

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000003761

1. Entity Name
THOMSON BLUE MOUNTAIN LLC



Principal Place of Business
3201 BRIDLE PATH CT.
GARLAND, TX 75044

Mailing Address
3201 BRIDLE PATH CT.
GARLAND, TX 75044



01132007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4325702

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOODE, CATHY
458 BLUE MOUNTAIN RD
SANTA ROSA BEACH, FL 32459

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOODE, CATHY 3201 BRIDLE PATH CT. GARLAND, TX 75044
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THOMSON, DONNA 2125 LONDON DR. PLANO, TX 75025
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03/23/07-80007-024 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Cathy Goode* *Cathy Goode*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/10/07
Date

972-495-2737
Daytime Phone #