

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000066592

FILED  
Mar 28, 2008  
Secretary of State

Entity Name: THORNWOOD MANAGEMENT CORPORATION

**Current Principal Place of Business:**

40 ISLAND ESTATES PKWY  
PALM COAST, FL 32137 US

**New Principal Place of Business:**

**Current Mailing Address:**

40 ISLAND ESTATES PKWY  
PALM COAST, FL 32137 US

**New Mailing Address:**

FEI Number: 59-3250516

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'KEEFE, THOMAS  
40 ISLAND ESTATES PKWY  
PALM COAST, FL 32137 US

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

CARROLL, TIMOTHY  
12297 MANDARIN ROAD  
JACKSONVILLE, FL 32223 US

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: TIMOTHY CARROLL

03/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: O'KEEFE, THOMAS  
Address: 40 ISLAND ESTATES PKWY  
City-St-Zip: PALM COAST, FL 32137

Title: DST (X) Delete  
Name: O'KEEFE, BARBARA  
Address: 40 ISLAND ESTATES PKWY  
City-St-Zip: PALM COAST, FL 32137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: O'KEEFE, BARBARA  
Address: 40 ISLAND ESTATES PKWY  
City-St-Zip: PALM COAST, FL 32137

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY CARROLL

RA

03/28/2008

Electronic Signature of Signing Officer or Director

Date