

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070420

Entity Name: SHEILA THOMPSON, LLC

Current Principal Place of Business:

1691 WOODMERE DRIVE
JACKSONVILLE, FL 32210

Current Mailing Address:

1691 WOODMERE DRIVE
JACKSONVILLE, FL 32210

FEI Number: 45-4080524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMPSON, SHEILA R
1691 WOODMERE DRIVE
JACKSONVILLE, FL 32210 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name THOMPSON, SHEILA R
Address 1691 WOODMERE DRIVE
City-State-Zip: JACKSONVILLE FL 32210

I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHEILA R THOMPSON

MGRM

03/11/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date