#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000046776

Entity Name: THOMPSON HUTCHINSON & ASSOCIATES, LLC

FILED
Apr 20, 2015
Secretary of State
CC4548063570

#### **Current Principal Place of Business:**

402 VITTORIO AVE

CORAL GABLES. FL 33146

## **Current Mailing Address:**

**402 VITTORIO AVE** 

CORAL GABLES. FL 33146 US

FEI Number: 27-0170370 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

THOMPSON, BAIRD 402 VITTORIO AVE CORAL GABLES, FL 33146 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 MGR

Title MGR

Name THOMPSON, BAIRD
Address 402 VITTORIO AVE

Name HUTCHINSON, WILLIAM
Address 17050 NW 15 STREET

City-State-Zip: CORAL GABLES FL 33146

City-State-Zip: PEMBROKE PINES FL 33028

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BAIRD THOMPSON

**PRESIDENT** 

04/20/2015