

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000000116

**Entity Name:** THOMAS TAX & FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

7402 N 56TH STREET  
SUITE 800-A  
TEMPLE TERRACE, FL 33617

**Current Mailing Address:**

7402 N 56TH STREET  
SUITE 800-A  
TEMPLE TERRACE, FL 33617

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

PHILSON, GALE M  
7402 N 56TH STREET  
SUITE 800-A  
TEMPLE, FL 33617 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 AMGR  
Name PHILSON, GALE M  
Address 7402 N 56TH STREET SUITE 800-A  
City-State-Zip: TEMPLE TERRACE FL 33617

Title MGR  
Name EVANS, TERRANCE P  
Address 7402 N 56TH STREET SUITE 800-A  
City-State-Zip: TEMPLE TERRANCE FL 33617

Title MGR  
Name THOMAS, BRITTANY NICOLE  
Address 7402 N 56TH STREET  
SUITE 800-A  
City-State-Zip: TEMPLE TERRACE FL 33617

*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:** GALE PHILSON

AMBR

04/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date