

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000002276

Entity Name: THOMPSON CONSULTING SERVICES, LLC**Current Principal Place of Business:**1135 TOWNPARK AVE STE 2101
LAKE MARY, FL 32746-4790**Current Mailing Address:**1135 TOWNPARK AVE STE 2101
LAKE MARY, FL 32746-4790 US**FEI Number:** 45-2015453**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VCORP SERVICES, LLC
5011 SOUTH STATE ROAD 7, SUITE 106
DAVIE, FL 33314 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
Name COUNSELL, NATHANIEL T
Address 1135 TOWNPARK AVENUE
STE 2101
City-State-Zip: LAKE MARY FL 32746

Title MGR
Name HOYLE, JON M
Address 1135 TOWNPARK AVENUE
STE 2101
City-State-Zip: LAKE MARY FL 32746

Title MGR
Name MANNING, MICHAEL V
Address 2970 COTTAGE HILL ROAD
City-State-Zip: MOBILE AL 36606

Title MGR
Name BAKER, JOHN III
Address 2970 COTTAGE HILL ROAD
City-State-Zip: MOBILE AL 36606

Title MGR
Name SHUMOCK, JAMES H
Address 2970 COTTAGE HILL ROAD
City-State-Zip: MOBILE AL 36606

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: NATHANIEL T. COUNSELL**MANAGER****03/28/2018**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date