

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 266043

FILED  
Apr 05, 2005  
Secretary of State

Entity Name: BILL THOMPSON'S OFFICE EQUIPMENT COMPANY, INC.

## Current Principal Place of Business:

103 S. BAYLEN STREET  
PENSACOLA, FL 32501 US

## New Principal Place of Business:

103 S. BAYLEN STREET  
PENSACOLA, FL 32502 US

## Current Mailing Address:

P.O. BOX 12525  
PENSACOLA, FL 32591 US

## New Mailing Address:

FEI Number: 59-1038949      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMPSON, ELOISE W  
220 PINE TREE DRIVE  
GULF BREEZE, FL 32561 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VDS ( ) Delete  
Name: THOMPSON, ELOISE W,  
Address: 220 PINE TREE DR  
City-St-Zip: GULF BREEZE, FL 00000,

Title: TDP ( ) Delete  
Name: ENGLISH, JOHN P.,  
Address: 3130 ORIOLE DRIVE  
City-St-Zip: GULF BREEZE, FL

Title: VP ( ) Delete  
Name: ENGLISH, LISA M  
Address: 3130 ORIOLE DR  
City-St-Zip: GULF BREEZE, FL 32561

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VDS (X) Change ( ) Addition  
Name: THOMPSON, ELOISE W,  
Address: 220 PINE TREE DR  
City-St-Zip: GULF BREEZE,, FL 32561

Title: TDP (X) Change ( ) Addition  
Name: ENGLISH, JOHN P.,  
Address: 3130 ORIOLE DRIVE  
City-St-Zip: GULF BREEZE, FL 32561

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN P. ENGLISH

PRES

04/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date