2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State
04-18-2005 90571 019 ***150.00

DOCUMENT # 335402

1. Entity Name
THALHEIMERS, INC.

Principal Place of Business	Mailing Address
3200 TAMIAMI TRAIL NORTH SUITE 100 NAPLES, FL 34112	3200 TAMIAMI TRAIL NORTH SUITE 100 NAPLES, FL 34103 US

04142005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
3200 TAMIAMI TRAIL N.	
Suite, Apt. #, etc.: # 100	Suite, Apt. #, etc.
City & State: NAPLES, FL.	City & State
Zip: 34103 Country	Zip Country

4. FEI Number: 59-1225215 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TRALHEIMER, SANDFORD C. 3200 TAMIAMI TRAIL NORTH SUITE 100 NAPLES, FL 34103	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	VD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	THALHEIMER, SANDFORD		NAME		
STREET ADDRESS	3200 TAMIAMI TRAIL NORTH STE 100		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP		
TITLE	SD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	THALHEIMER, BRUCE		NAME		
STREET ADDRESS	3200 TAMIAMI TRAIL NORTH STE 100		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	THALHEIMER, NANCY		NAME		
STREET ADDRESS	3200 TAMIAMI TRAIL NORTH STE 100		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE		☒ Change ☐ Addition
NAME	THALHEIMER, ERIKK		NAME	THALHEIMER, ERIKKA	
STREET ADDRESS	3200 TAMIAMI TRAIL NORTH STE 100		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4.15.05 239-261-8422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
SANFORD C. THALHEIMER