

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 571186 (6)

1. Corporation Name
W.D. THOMPSON, INC.



Principal Place of Business
1629 E. 9TH ST.
FORT LAUDERDALE FL 33316

Mailing Address
1629 E. 9TH ST.
FORT LAUDERDALE FL 33316

2. Principal Place of Business

2a. Mailing Address

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Subst. Apt. #, etc.

Subst. Apt. #, etc.

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City & State

City & State

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9. Name and Address of Current Registered Agent

THOMPSON, WILLIAM D.
1629 SE 9TH ST.
FORT LAUDERDALE FL 33301

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0504, Florida Statutes.

SIGNATURE

(Signature must be printed in block letters, and must be accompanied by the name of the person signing.)

(If filed by a registered agent, the signature must be accompanied by the name of the person signing.)

DATE

12. OFFICERS AND DIRECTORS

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement thereto 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-96

CR2E034 (12/95)