2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 08:00 AM
Secretary of State

DOCUMENT # H44056

1. Entity Name
THOMAS PRODUCE COMPANY

Principal Place of Business	Mailing Address
9905 CLINT MOORE ROAD BOCA RATON, FL 33496-1016	9905 CLINT MOORE ROAD BOCA RATON, FL 33496-1016

01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2572651
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WILSON, RICHARD L
9905 CLINT MOORE ROAD
BOCA RATON, FL 33496

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

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

U00000065665
02/25/04-80047-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	THOMAS, NORMAN
STREET ADDRESS	9905 CLINT MOORE RD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	P
NAME	THOMAS, SR., JOHN
STREET ADDRESS	9905 CLINT MOORE ROAD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	T
NAME	THOMAS, JR., JOHN
STREET ADDRESS	9905 CLINT MOORE RD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	D
NAME	THOMAS, JEFFREY
STREET ADDRESS	9905 CLINT MOORE RD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	S
NAME	THOMAS, STEPHEN
STREET ADDRESS	9905 CLINT MOORE RD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: X _____ 2/23/04 561-482-1111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

STEPHEN M. THOMAS