

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037590

FILED
Apr 24, 2008
Secretary of State

Entity Name: THETFORD PROPERTIES INC.

Current Principal Place of Business:

109 OPP BLVD
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

119 HARBESON AVENUE S.E.
FT. WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 68-0549408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THETFORD, ROBERT B JR.
119 HARBESON AVENUE, S.E.
FORT WALTON BEACH, FL 32548 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: P () Delete
Name: THETFORD, ROBERT S
Address: 109 OPP BLVD
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: ST () Delete
Name: THETFORD, ROBERT B
Address: 119 HARBESON AVENUE, S.E.
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT B. THETFORD JR

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04/24/2008

Electronic Signature of Signing Officer or Director

Date