

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V56988

FILED  
Apr 29, 2004  
Secretary of State

**Entity Name:** THUNDERNET DEVELOPMENT GROUP, INC.

**Current Principal Place of Business:**

4412 RIVER ROAD  
LOUISVILLE, KY 40222 US

**New Principal Place of Business:**

5381 BENJAMIN AVE  
BOYNTON BEACH, FL 33437 US

**Current Mailing Address:**

4412 RIVER ROAD  
LOUISVILLE, KY 40222 US

**New Mailing Address:**

5381 BENJAMIN AVE  
BOYNTON BEACH, FL 33437 US

FEI Number: 65-0351330

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOOS, JAMES A CPA  
3000 NE 30TH PLACE  
204  
FORT LAUDERDALE, FL 33306 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: PARTIS, ALAN C  
Address: 4412 RIVER ROAD  
City-St-Zip: LOUISVILLE, KY 40222

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PARTIS, ALAN C  
Address: 5381 BENJAMIN AVE  
City-St-Zip: BOYNTON BEACH, FL 33437

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: ALAN PARTIS

P

04/29/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date