## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 578373** 

FILED Apr 23, 2007 Secretary of State

Entity Name: T.H.G. RENTALS & SALES OF CLEARWATER, INC.

Current Principal Place of Business: New Principal Place of Business:

3445 E. BAY DRIVE LARGO, FL 33771

Current Mailing Address: New Mailing Address:

3445 E. BAY DRIVE LARGO, FL 33771 US

FEI Number: 59-1836106 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOLCOMBE, JOHN W
19941 GULF BLVD UNIT D
1NDIAN ROCKS BEACH, FL 33785 US
1HOLCOMBE, JOHN W
19941 GULF BLVD UNIT D
1NDIAN SHORES, FL 33785 US

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: JOHN W. HOLCOMBE 04/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: HOLCOMBE, JOHN W Name: HOLCOMBE, JOHN W

Address: 19941 GULF BLVD UNIT D

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

Name: Tiolcoombl, 30 in VV

Address: 19941 GULF BLVD UNIT D

City-St-Zip: INDIAN SHORES, FL 33785 US

Title: ST () Delete Title: ST (X) Change () Addition Name: HOLCOMBE, MARIE B Name: HOLCOMBE, MARIE B

Address: 19941 GULF BLVD UNIT D

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

Raffle: HOLCOWBE, WARTE B

Address: 19941 GULF BLVD UNIT D

City-St-Zip: INDIAN SHORES, FL 33785 US

Title: V ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HAWKINS, MARY L
 Name:

 Address:
 ONE 19TH AVE UNIT III
 Address:

 City-St-Zip:
 INDIAN ROCKS BEACH, FL 33785
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN W. HOLCOMBE PRES 04/23/2007