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 all other like empowered. SIGNATURE: MICHAEL THOMAS

Electronic Signature of Signing Officer/Director Detail

I hereby 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

SIGNATURE: Electronic Signature of Registered Agent

Officer/Director Detail :

Title	SD	Title	PD
Name	THOMAS, ROBERT M	Name	THOMAS, MICHAEL
Address	50 RANCH ROAD	Address	3412 BAY TO BAY BLVD., SUITE B
City-State-Zip:	THONOTOSASSA FL 33592	City-State-Zip:	TAMPA FL 33629
Title	TD	Title	AS
Title Name	TD THOMAS, STEPHEN	Title Name	AS MURPHY-THOMAS, SUKI

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.

Entity Name: WAYNE THOMAS INC.

Current Principal Place of Business:

3412 BAY TO BAY BLVD STE B TAMPA, FL 33269

DOCUMENT# 178511

Current Mailing Address:

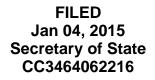
PO BOX 10070 TAMPA, FL 33679 US

FEI Number: 59-0714688

Name and Address of Current Registered Agent:

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

THOMAS, MICHAEL 3412 WEST BAY TO BAY BLVD STE B TAMPA, FL 33629 US



Certificate of Status Desired: No

Date

PRESIDENT