

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000003147

**FILED  
Apr 29, 2016  
Secretary of State  
CC6277079857**

**Entity Name:** THOMA ENTERPRISES INC.

**Current Principal Place of Business:**

914 HUNTINGTON ROAD  
PANAMA CITY, FL 32405

**Current Mailing Address:**

914 HUNTINGTON ROAD  
PANAMA CITY, FL 32405

**FEI Number:** 20-3149267

**Certificate of Status Desired:** No

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

THOMA, ALLEN F  
914 HUNTINGTON ROAD  
PANAMA CITY, FL 32405 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name THOMA, ALLEN FJR  
Address 914 HUNTINGTON RD  
City-State-Zip: PANAMA CITY FL 32405

Title VP  
Name THOMA, PATRICIA J  
Address 914 HUNTINGTON RD  
City-State-Zip: PANAMA CITY FL 32405

Title T  
Name THOMA, ALLEN FJR  
Address 914 HUNTINGTON RD  
City-State-Zip: PANAMA CITY FL 32405

Title S  
Name THOMA, PATRICIA J  
Address 914 HUNTINGTON RD  
City-State-Zip: PANAMA CITY FL 32405

*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 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:** ALLEN THOMA

**PRESIDENT**

**04/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date