

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # 153564 1. Entity Name THAYER'S, INC.	
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Principal Place of Business 4121 S.W. 34TH STREET ORLANDO, FL 32811 US	Mailing Address 4121 S.W. 34TH STREET ORLANDO, FL 32811 US
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DO NOT WRITE IN THIS SPACE



04162004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-0833727	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fees Required
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5. Name and Address of Current Registered Agent

KENNEDY, WILLIAM P
4121 S.W. 34TH STREET
ORLANDO, FL 32811

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000143893 04/30/04-80107-018 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST KENNEDY, WILLIAM P 4121 S.W. 34TH STREET ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LEE, BARBARA J 4121 S.W. 34TH STREET ORLANDO, FL 32811
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: W.P. Kennedy 4/26/04 (407) 999-2225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #