# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 07, 2008**
**Secretary of State**

DOCUMENT# 178511

**Entity Name:** WAYNE THOMAS INC.

**Current Principal Place of Business:**

100 NORTH TAMPA STREET SUITE 1970
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3436
TAMPA, FL 33601

**New Mailing Address:**

**FEI Number: 59-0714688** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

THOMAS, MICHAEL
100 NORTH TAMPA STREET
SUITE 1970
TAMPA, FL 33602 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: SD ( ) Delete
Name: THOMAS, ROBERT M
Address: 50 RANCH ROAD
City-St-Zip: THONOTOSASSA, FL 33592

Title: PD ( ) Delete
Name: THOMAS, MICHAEL
Address: 100 NORTH TAMPA STREET SUITE 1970
City-St-Zip: TAMPA, FL 33602

Title: TD ( ) Delete
Name: THOMAS, STEPHEN
Address: 11705 BOYETTE ROAD, #425
City-St-Zip: RIVERVIEW, FL 33569

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: AS ( ) Change (X) Addition
Name: MURPHY-THOMAS, SUKI
Address: 100 NORTH TAMPA STREET SUITE 1970
City-St-Zip: TAMPA, FL 33602

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL THOMAS PD 01/07/2008

Electronic Signature of Signing Officer or Director — Date