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2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address,

SIGNATURE:

with all other like empowered.

Feb 11, 2002 8:00 am § Secretary of State , DOCUMENT # 268106 1. Entity Name 02-11-2002 90096 030 ***150.00 THOMPSON AND COMPANY OF TAMPA INC Principal Place of Business Mailing Address 5401 HANGAR COURT 5401 HANGAR COURT PO BOX 30303 PO BOX 30303 TAMPA FL 33634 TAMPA FL 33634 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0999777 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRANZBLAU.R M Street Address (P.O. Box Number is Not Acceptable) 1102 CULBREATH ISLES DRIVE **TAMPA FL 33609** City Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State CR2E034 (9/01) 🛝 🕽 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F ☐ Delete TITL F ☐ Change ☐ Addition NAME FRANZBŁAU, CARLO NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP TAMPA, FL 00000 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME Franzblau, R M NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP TAMPA, FL 00000 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition TD NAME DORR, ALIX NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 00000 TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME LEOPOLD, GERALD STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 00000 Delete TITLE ☐ Change ☐ Addition FRANZBLAU. JO Z NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 00000 □ Delete TITLE ... Change ☐ Addition NAME HILL, FRANK NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TAMPA FL 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report of 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 11 or Block 12 if