

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 364871

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Entity Name:** GEORGE R. THOMPSON CORPORATION

**Current Principal Place of Business:**

1 SOUTH GOLF VIEW DRIVE  
ENGLEWOOD, FL 342231826

**New Principal Place of Business:**

1 SOUTH GOLF VIEW DRIVE  
ENGLEWOOD, FL 342231826 US

**Current Mailing Address:**

1 SOUTH GOLF VIEW DRIVE  
ENGLEWOOD, FL 342231826

**New Mailing Address:**

1 SOUTH GOLF VIEW DRIVE  
ENGLEWOOD, FL 342231826 US

FEI Number: 59-1301719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMPSON, JR GEORGE R.  
1 SOUTH GOLFFVIEW DRIVE  
ENGLEWOOD, FL 34223 US

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

THOMPSON, ANDREW M  
1 SOUTH GOLFFVIEW DRIVE  
ENGLEWOOD, FL 34223 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: ANDREW M THOMPSON

04/07/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: THOMPSON, ANDREW  
Address: 1 SOUTH GOLFFVIEW DRIVE  
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: VD  
Name: THOMPSON, ANDREW MOORE  
Address: 1 SOUTH GOLFFVIEW  
City-St-Zip: ENGLEWOOD, FL 0, FL 34223 US

Title: S  
Name: ANN SCOTT NELSON  
Address: 5010 WEST LEONA STREET  
City-St-Zip: TAMPA, FL 33629 US

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: ANDREW M THOMPSON

P

04/07/2011

Electronic Signature of Signing Officer or Director

Date