

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 401808

Entity Name: THOMAS ACRES, INC

FILED
Jul 09, 2008
Secretary of State

Current Principal Place of Business:

6091 S PLEASANT GROVE RD
INVERNESS, FL 344528306 US

New Principal Place of Business:

6091 S PLEASANT GROVE RD
INVERNESS, FL 344528386 US

Current Mailing Address:

6091 S PLEASANT GROVE RD
INVERNESS, FL 32652

New Mailing Address:

6091 S PLEASANT GROVE RD
INVERNESS, FL 344528386 US

FEI Number: 59-1430245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADFORD, CARTER A
338 N MAGNOLIA AVE
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

THOMAS, JOHN L MR
6091 S. PLEASANT GROVE RD
INVERNESS, FL 344528386 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: JOHN L. THOMAS

07/09/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: STEWART, CAROLYN,
Address: 6065 EMERSON ROAD
City-St-Zip: BROOKSVILLE, FL

Title: PD () Delete
Name: THOMAS, JESSE, H,
Address: 1521 W OAK PARK BLVD
City-St-Zip: HOMOSASSA, FL

Title: TD () Delete
Name: THOMAS, JOHN, L,
Address: 6091 S PLEASANT GROVE RD
City-St-Zip: INVERNESS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: STEWART, CAROLYN,
Address: 6065 EMERSON ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: PD (X) Change () Addition
Name: THOMAS, JESSE, H,
Address: 1521 W OAK PARK BLVD
City-St-Zip: HOMOSASSA, FL 34446

Title: TD (X) Change () Addition
Name: THOMAS, JOHN, L,
Address: 6091 S PLEASANT GROVE RD
City-St-Zip: INVERNESS, FL 344528386

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: JOHN L. THOMAS

MR

07/09/2008

Electronic Signature of Signing Officer or Director

Date