2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007
Secretary of State

DOCUMENT# 758272

Entity Name: THORNEBROOK II MAINTENANCE CORPORATION, INC.

Current Principal Place of Business:

4140 N.W. 27TH LANE
GAINESVILLE, FL 32606

New Principal Place of Business:

4140 N.W. 27TH LANE
STE M
GAINESVILLE, FL 32606

Current Mailing Address:

4140 N.W. 27TH LANE
GAINESVILLE, FL 32606

New Mailing Address:

4140 N.W. 27TH LANE
STE M
GAINESVILLE, FL 32606

FEI Number: 59-2264680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALTHER, ROBERT
4140 NW 27TH LANE, SUITE F
GAINESVILLE, FL 32606 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WALTHER, ROBERT
Address: 4140 NW 27TH LN STE F
City-St-Zip: GAINESVILLE, FL 32606,

Title: VD ( ) Delete
Name: THOMSON, T.M.
Address: 4140 NW 27TH LANE STE H
City-St-Zip: GAINESVILLE, FL 32606

Title: STD ( ) Delete
Name: BLAIR, CAROLE M
Address: 4140 NW 37TH LANE STE G
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change ( ) Addition
Name: BLAIR, CAROLE M
Address: 394 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLE M BLAIR STD 03/12/2007

Electronic Signature of Signing Officer or Director — Date