## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Apr 22, 2008 8:00 am Secretary of State DOCUMENT-# 855950 1. Entity Name 04-22-2008 90017 001 \*\*\*150.00 THATCHERS INCORPORATED Principal Place of Business Mailing Address 263 SEABOARD LANE FRANKLIN TN 37067 263 SEABOARD LANE FRANKLIN TN 37067 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) Applied For City & State City & State 4. FEI Number 62-1158215 Not Applicable Ζıp Ζp Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT\_CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed harrolot registered agent and site 1 applicable. (NOTE: Registered Agerd signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD TITLE D TITLE ☐ Change X Addition ☐ Delete SHERRER, ROBERT NAME Casalena, Sergio 424 SOUTH LYNN RIGGS BLVD STREET ADDRESS 411 N. Cranberry Rd. STREET ADDRESS CITY-ST-ZIP CLAREMORE OK 74017 CITY - ST - ZIP Westminster MD 21157 TITLE ☐ Delete TITLE ☐ Change Addition NAME SALYER, WALTER L NAME 263 SEABOARD LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FRANKLIN TN 37067 CITY - ST - ZIP TITLE X Delete TITLE ☐ Change ☐ Addition CASALENA, SERGIO STREET ADDRESS STREET ADDRESS 411 N GRANBERRY RD CITY-ST-7IP WESTMINSTER MD 21157 CITY-ST-7IP D ☐ Delete TITLE Change Addition WILLIAMS, JAMES P NAME MAME 263 SEABOARD LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FRANKLIN TN 37067 CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CHY-ST-2IP CITY-ST-ZIP TITLE Delete TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or 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 10 or Block 11

Walter L. Salver 4-3-08
Date Date

**FILED**