

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 857324

FILED
Jun 30, 2005
Secretary of State

Entity Name: THOR, INCORPORATED OF ROANOKE

Current Principal Place of Business:

3313 PLANTATION RD
ROANOKE, VA 24012 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13127
ROANOKE, VA 240313127

New Mailing Address:

FEI Number: 54-0789386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: WHITTLE, JOHN P.,
Address: 3743 PEAKWOOD DR, SW
City-St-Zip: ROANOKE, VA 24014

Title: PD () Delete
Name: BRADSHAW, JAMES B.,
Address: 209 PARK CREST RD
City-St-Zip: ROANOKE, VA 24014

Title: STD () Delete
Name: BRICKEY, IRIS A.,
Address: HC 34 BOX 325
City-St-Zip: NEW CASTLE, VA 24127

Title: D () Delete
Name: WHITTLE, SANDRA B.,
Address: 3743 PEAKWOOD DR, SW
City-St-Zip: ROANOKE, VA 24014

Title: V () Delete
Name: GREER, JOSEPH E
Address: 247 FIVE MILE MT
City-St-Zip: CALLAWAY, VA 24067

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: V () Change (X) Addition
Name: WHITTLE, ALLEN B
Address: P O BOX 13124
City-St-Zip: ROANOKE, VA 24012

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: IRIS A. BRICKEY

S/T

06/30/2005

Electronic Signature of Signing Officer or Director

_____ Date