2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F63488

Entity Name: PAUL C. THOMAS & ASSOCIATES, INC.

FILED Apr 22, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of I	New Principal Place of Business:	
2207 DOGWOOD CIRCL C/O PAUL C. THOMAS, MT. DORA, FL 32757	P O BOX 1092	2207 DOGWOOD CIRCL MT. DORA, FL 32757		
Current Mailing Address:		New Mailing Address:		
2207 DOGWOOD CIRCL C/O PAUL C. THOMAS, MT. DORA, FL 32756	P O BOX 1092	2207 DOGWOOD CIRCL MT. DORA, FL 32756	E US	
FEI Number: 59-2301621	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
THOMAS, PAUL C. 2207 DOGWOOD CIRCL MT. DORA, FL 32757	.E 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:				
Electror	ic Signature of Registered Ager	nt	Date	
Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS:	

Title: PD () Delete Title: () Change () Addition Name: THOMAS, PAUL C, Name: Address: 2207 DOGWOOD CIRCLE Address: City-St-Zip: MT DORA, FL 32757 US City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL C THOMAS PD 04/22/2007