

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F76158

Entity Name: T.H.C., INC.

FILED
Jan 06, 2004
Secretary of State

Current Principal Place of Business:

5594 MELALEUCA LANE
P.O. BOX 5419
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

PO BOX 5419
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 59-2226288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, JOAN MURRAY
5594 MELALLEUCA LANE
LAKE WORTH, FL 33463 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: PST () Delete
Name: BROWN, JOAN MURRAY,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL

Title: PST () Delete
Name: BROWN, JOAN MURRAY,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL

Title: V () Delete
Name: BROWN, RICHARD,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL

Title: V () Delete
Name: BROWN, RICHARD,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VST (X) Change () Addition
Name: BROWN, JOAN MURRAY,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL 33463

Title: VST (X) Change () Addition
Name: BROWN, JOAN MURRAY,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL 33463

Title: P (X) Change () Addition
Name: BROWN, RICHARD,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL 33463

Title: P (X) Change () Addition
Name: BROWN, RICHARD,
Address: 5594 MELALEUCA LANE
City-St-Zip: LAKE WORTH, FL 33463

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: JOAN MURRAY BROWN

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01/06/2004

Electronic Signature of Signing Officer or Director

Date