

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002182

Entity Name: THAMES TRADING INC.

FILED  
Jan 18, 2011  
Secretary of State

**Current Principal Place of Business:**

509 SOUTH PONCE DE LEON BLVD  
ST AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

509 SOUTH PONCE DE LEON BLVD  
ST AUGUSTINE, FL 32084

**New Mailing Address:**

FEI Number: 59-2946093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHAW, MICHAEL J  
ENGLISH LANDING MARINA  
509 SOUTH PONCE DE LEON BLVD  
ST AUGUSTINE, FL 32084 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: D  
Name: RAPHAEL, GEORGE  
Address: GUNNS CAMP  
City-St-Zip: B/BAG 33, MAUN, BOTSWANA,

Title: VD  
Name: HORNER, SARAH  
Address: GUNNS CAMP  
City-St-Zip: B/BAG 33, MAUN, BOTSWANA,

Title: D  
Name: MACKENZIE, JENNA  
Address: GUNNS CAMP  
City-St-Zip: B/BAG 33, MAUN, BOTSWANA,

Title: ST  
Name: SHAW, MICHAEL J  
Address: 5095 PONCE DE LEON BLVD  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: PFD  
Name: STERLING, JAMES H FINANCI  
Address: 509 S PONCE DE LEON BLVD  
City-St-Zip: ST AUGUSTINE, FL 32084

I hereby 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 all other like empowered.

SIGNATURE: JAMES H STERLING

PFD

01/18/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date