2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007
Secretary of State

DOCUMENT# F97000006740

Entity Name: THAYER FLORIDA PARTNERS, INC.

Current Principal Place of Business:

410 SEVERN AVENUE, SUITE 314
ANNAPOLIS, MD 21403

New Principal Place of Business:

Current Mailing Address:

410 SEVERN AVENUE, SUITE 314
ANNAPOLIS, MD 21403

New Mailing Address:

FEI Number: 52-2056441 **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 RD
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: PD ( ) Delete
Name: PILLSBURY, LELAND C
Address: 410 SEVERN AVENUE, SUITE 314
City-St-Zip: ANNAPOLIS, MD 21403

Title: VS ( ) Delete
Name: WEYMER, DAVID J
Address: 410 SEVERN AVENUE, SUITE 314
City-St-Zip: ANNAPOLIS, MD 21403

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition
Name: PILLSBURY, LELAND C P/D
Address: 410 SEVERN AVENUE, SUITE 314
City-St-Zip: ANNAPOLIS, MD 21403

Title: VP/T (X) Change ( ) Addition
Name: GAUTHIER, KIM VP/T
Address: 410 SEVERN AVENUE, SUITE 314
City-St-Zip: ANNAPOLIS, MD 21403

Title: VP/S ( ) Change (X) Addition
Name: KAMMERER, THOMAS VP/S
Address: 410 SEVERN AVENUE, SUITE 314
City-St-Zip: ANNAPOLIS, MD 21403

Title: VPAS ( ) Change (X) Addition
Name: SUN DO, NGHIEM VPAS
Address: 410 SEVERN AVENUE, SUITE 314
City-St-Zip: ANNAPOLIS, MD 21403

Title: VP ( ) Change (X) Addition
Name: WARFIELD, CARROLL M VP
Address: 410 SEVERN AVENUE, SUITE 314
City-St-Zip: ANNAPOLIS, MD 21403

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: LELAND C. PILLSBURY P/D 04/20/2007

Electronic Signature of Signing Officer or Director — Date