

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005938

FILED
Apr 15, 2004
Secretary of State

Entity Name: THIG CORPORATION

Current Principal Place of Business:

410 SEVERN AVENUE, STE 314
ANNAPOLIS, MD 21403

New Principal Place of Business:

Current Mailing Address:

410 SEVERN AVENUE, STE 314
ANNAPOLIS, MD 21403

New Mailing Address:

FEI Number: 52-2128118 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E PARK AVE
TALLAHASSEE, FL 32301 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 AVE., STE 314
City-St-Zip: ANNAPOLIS, MD

Title: V () Delete
Name: WEYMER, DAVID J
Address: 410 SEVERN AVE., STE 314
City-St-Zip: ANNAPOLIS, MD

Title: T () Delete
Name: REID, MARTIN A
Address: 410 SEVERN AVE., STE 314
City-St-Zip: ANNAPOLIS, MD

Title: D () Delete
Name: MALEK, FREDERIC V
Address: 410 SEVERN AVE., STE 314
City-St-Zip: ANNAPOLIS, MD

Title: D (X) Delete
Name: FERRUCCI, MARK A
Address: 1209 ORANGE STREET
City-St-Zip: WILMINGTON, DE

Title: D (X) Delete
Name: BORRIELLO, DOMENIC
Address: 1209 ORANGE STREET
City-St-Zip: WILMINGTON, DE

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
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Address:
City-St-Zip:

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

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

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: DAVID J. WEYMER

V

04/15/2004

Electronic Signature of Signing Officer or Director

_____ Date