


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90009 036 ***158.75

DOCUMENT # G71831	
1. Entity Name THE THRASH HOMESTEAD CORPORATION	

Principal Place of Business 1101 MASSACHUSETTS AVENUE ST. CLOUD, FL 34769	Mailing Address 1101 MASSACHUSETTS AVENUE ST. CLOUD, FL 34769
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DO NOT WRITE IN THIS SPACE



02082006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2353034	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent EVERETT, W.W. JR. 1101 MASSACHUSETTS AVE. ST. CLOUD, FL 34769

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P EVERETT, W.W. III 1160 WALNUT GROVE ROAD BRIDGEPORT, NY 13030
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S EVERETT, CHERRY S 6267 S. BREEZE RD. 1101 MASSACHUSETTS AVE ST CLOUD, FL 34769
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VS EVERETT, ANNETTE M 1160 WALNUT GROVE ROAD BRIDGEPORT, NY 13030
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VT TRAVER, LEANNE E 68 PORT ROYAL SQUARE PORT ROYAL, VA 22535
TITLE NAME STREET ADDRESS CITY- ST- ZIP	CT EVERETT, W.W. JR 1101 MASSACHUSETTS AVENUE ST CLOUD, FL 34768
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>W. W. Everett, Jr.</i> W. W. Everett, Jr., Chairman	<i>2/6/2006</i> Date	<i>(804) 742-5811</i> Daytime Phone
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR