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Mar 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H20853 (8)
1. Corporation Name
STEPHEN ROBERT THOMPSON ATTORNEY AT LAW, P.A.



Principal Place of Business Mailing Address
3479 10 AVE SW
NAPLES FL 34103
US XXXXXXXX
3479 10 AVE SW
NAPLES FL 34103
US XXXXXXXX

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 5100 N. Tamiami Trail 26 5100 N. Tamiami Trail
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 126 27 126
City & State City & State
23 Naples, FL 28 Naples, FL
Zip Zip Country Country
24 34103 25 USA 29 34103 30 USA

3. Date Incorporated or Qualified
09/13/1984
4. FEI Number 59-2451862 Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
THOMPSON, STEPHEN ROBERT
3479 10 AVE SW
NAPLES FL 34103
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
5100 N. Tamiami Trail
83 Suite 126
84 City Naples FL 85 Zip Code 34103

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 4/17/98

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DPST ☐ DELETE 1.1 TITLE ☐ Change ☐ Addition
NAME THOMPSON, STEPHEN ROBERT 1.2 NAME
STREET ADDRESS 3479 10 AVE SW 1.3 STREET ADDRESS 5100 N. Tamiami Trail #126
CITY-ST-ZIP NAPLES FL 1.4 CITY-ST-ZIP
TITLE ☐ DELETE 2.1 TITLE ☐ Change ☐ Addition
NAME 2.2 NAME
STREET ADDRESS 2.3 STREET ADDRESS
CITY-ST-ZIP 2.4 CITY-ST-ZIP
TITLE ☐ DELETE 3.1 TITLE ☐ Change ☐ Addition
NAME 3.2 NAME
STREET ADDRESS 3.3 STREET ADDRESS
CITY-ST-ZIP 3.4 CITY-ST-ZIP
TITLE ☐ DELETE 4.1 TITLE ☐ Change ☐ Addition
NAME 4.2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-ST-ZIP 4.4 CITY-ST-ZIP
TITLE ☐ DELETE 5.1 TITLE ☐ Change ☐ Addition
NAME 5.2 NAME
STREET ADDRESS 5.3 STREET ADDRESS
CITY-ST-ZIP 5.4 CITY-ST-ZIP
TITLE ☐ DELETE 6.1 TITLE ☐ Change ☐ Addition
NAME 6.2 NAME
STREET ADDRESS 6.3 STREET ADDRESS
CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)