2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H27529

FEI Number: 59-2476002

FILED Jan 10, 2007 Secretary of State

Certificate of Status Desired ()

Entity Name: THOMAS M. SHEATS AND ASSOCIATES, INC.

Current Principal Place of Business: New Principal Place of Business:

14501 OLD SHERIDAN ST 14501 OLD SHERIDAN ST

FORT LAUDERDALE, FL 33330 SOUTHWEST RANCHES, FL 33330 US US

Current Mailing Address: New Mailing Address:

FEI Number Applied For ()

14501 OLD SHERIDAN ST 14501 OLD SHERIDAN ST

SOUTHWEST RANCHES, FL 33330 US

FORT LAUDERDALE, FL 33330 US

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

FEI Number Not Applicable ()

SHEATS, THOMAS M. SHEATS, THOMAS M.

14501 OLD SHERIDAN ST. 14501 OLD SHERIDAN ST. FORT LAUDERDALE, FL 33330 SOUTHWEST RANCHES, FL 33330 US US

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: TOM SHEATS 01/10/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SHEATS, THOMAS M., SHEATS, THOMAS M., Name: Name: 14501 OLD SHERIDAN ST 14501 OLD SHERIDAN ST Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33330 City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: VΡ Title: VΡ (X) Change () Addition () Delete

Name: SHEATS, DEBORAH R. Name: SHEATS, DEBORAH R., 14501 OLD SHERIDAN ST 14501 OLD SHERIDAN ST Address: Address:

FORT LAUDERDALE, FL 33330 SOUTHWEST RANCHES, FL 33330 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: TOM SHEATS 01/10/2007