

2002 **FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

05-28-2002 91748 004 \*\*\*158.75

DOCUMENT # H97045

1. Entity Name

KEN THORNBERRY AND ASSOCIATES, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1880 N. UNIVERSITY DRIVE.

Suite, Apt. #, etc.

SUITE 102

City & State

PLANTATION, FL 33322

Zip

33322

Country

USA

3. Mailing Address

1802 N. UNIVERSITY DRIVE

Suite, Apt. #, etc.

PMB 284

City & State

PLANTATION, FL 33322

Zip

33322

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2637733

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

KENNETH D. THORNBERRY

Street Address (P.O. Box Number is Not Acceptable)

1802 N. UNIVERSITY DRIVE: PMB 284

City

PLANTATION

FL

Zip Code

33322

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

*Kenneth D. Thornberry*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5/13/02

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)



January 1 - May 1. Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.



\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD  
THORNBERRY, KENNETH D.  
9571 N.W. 31ST PLACE  
SUNRISE, FL 33351

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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IN THIS SPACE**

13. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Kenneth D. Thornberry*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH D. THORNBERRY

PRESIDENT

5/13/02

Date

954-474-2616

Daytime Phone #

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H97045

1. Entity Name  
**KEN THORNBERRY & ASSOCIATES, INC.**

Attachment

Principal Place of Business 1802 N UNIVERSITY DR SUITE 102 PLANTATION FL 33322 US		Mailing Address 1802 N UNIVERSITY DR PMB #284 → 284 PLANTATION FL 33322 US	
2. Principal Place of Operations		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent <b>THORNBERRY, KENNETH D.</b> 4951 NORTH UNIVERSITY DR SUITE 15 SUITE 12 LAUDERHILL FL 33351		7. Name and Address of New Registered Agent <b>THORNBERRY, KENNETH D.</b> 1802 N. UNIVERSITY DR. SUITE 102 PLANTATION FL 33322	
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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.

SIGNATURE <i>Kenneth D. Thornberry</i> Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. <input type="checkbox"/>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THORNBERRY, KENNETH D. 9571 N.W. 31ST PLACE SUNRISE FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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SIGNATURE: <i>Kenneth D. Thornberry</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<b>KENNETH D. THORNBERRY</b> PRESIDENT	1/20/01	954-474-2616
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KEN THORNBERRY & ASSOCIATES, INC. 1802 N. UNIVERSITY DR. PMB NO. 284 PLANTATION, FL 33322		8012 03-27/01 FL 736
Pay to the Order of <b>DEPARTMENT OF STATE</b>		\$ 158.75
ONE HUNDRED FIFTY EIGHT AND 75/100		Dollars
<b>NationsBank</b> NationsBank, N.A. ACH R/T 083100277		
For <i>Kenneth D. Thornberry</i>		
⑆063100277⑆ 000434058278⑆ 8012		