FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

J45103 DOCUMENT #

(5)

THOMPSON & ASSOCIATES, INC.

Principal Place of Business	Mailing	Addr

5401 W KENNEDY BLVD., #345

ess

5401 W KENNEDY BLVD.. #345 TAMPA FL 33609



		3. Date Incorporated or Qualified	3a. Date of Last Report		
		11/26/1986	06/16/1995		
2a. Mailing Address 26		4. FEI Number 59-2751888	Applied For Not Applicable		
Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
27 City & State 28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
<u></u> ⊢¬	intry	8. This corporation has liability for in Florida Statutes			
241 [25]		10. Name and Address of New Registered Agent			
9. Name and Address of Current Registered Agent THOMPSON, LOUISE M. 5401 W KENNEDY BLVD., #345 TAMPA FL 33609		ss (P.O. Box Number is Not Acceptabl	le)		
	Suite, Apt. #, étc. City & State Zip Cou 30	Suite, Apt. #, etc. City & State Zio Country 30 lered Agent 81 Name 82 Street Addre 83 84 City	Suite, Apt. #, etc. Suite, Apt. #, etc. Site State Status Desired Site Site Status Desired Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site Site		

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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505. Florida Statutes.

12,	jednie spied coprobat sina obegdeen agenaat D OFFICERS AND EIF		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPS	DELETE	* 1 1/1LE	Change Addition
NAME	THOMPSON, LOUISE M.		1.2 NAME	
STREET ADDRESS	302 CASPIAN ST		1.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL		1.4 City-St-ZiF	
TITLE		☐ DELETE	2 1 TITLE	Change C Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STHEET ADDRESS	
CITY-ST-ZIP			2 4 City - St - ZiP	
TILE		☐ DELETE	3 1 TITLE	Change Addition
NAME			3.2 NAMÉ	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4.01[Y+S[-Z]P	
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 11/11 6	☐ Change ☐ Addition
NAME			5.2 NAMÉ	
STREET ADDRESS			5 3 STREET ADDRESS	
- "			5 4 CHTY - ST - ZIP	
CHY-ST-ZIP TITLE		☐ DELETE	6 1 TILLE	Change Addition
NAME			€ 2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
STREET AUDAESS			6.4 CITY+S1-ZIP	

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 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 certify that I am an officer or director of the corporation or the receiver or bustee 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 or an attachment with an accidence.

SIGNATURE:

F SIGNING OFFICER OR GRECTOR 40 MPSON TYPEO OR PRINTED NAME

4/2/96 813 287-8955