

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K17542

FILED
Jan 21, 2010
Secretary of State

Entity Name: THOMPSON REPAIRS, INC.

Current Principal Place of Business:

4857 DIGNAN ST.
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

4857 DIGNAN ST.
JACKSONVILLE, FL 32254 US

New Mailing Address:

FEI Number: 59-2878420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, NINA L
4857 DIGNAN STREET
JACKSONVILLE, FL 32254 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPC
Name: THOMPSON, STEPHEN L 111
Address: 5351 MARLENE AVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DST
Name: THOMPSON, NINA L
Address: 5351 MARLENE AVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: VPCD
Name: MARTINEZ, PETER
Address: 10350 SHELBY CREEK RD S
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP
Name: SMITH, WOODROW
Address: 3335 SNELL ST
City-St-Zip: JACKSONVILLE, FL 32218

I hereby 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 all other like empowered.

SIGNATURE: NINA L. THOMPSON

ST

01/21/2010

Electronic Signature of Signing Officer or Director

Date