

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L37673

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: THOMAS AND SON, INC.

**Current Principal Place of Business:**

4542 GALL BLVD.  
ZEPHYRHILLS, FL 33541

**New Principal Place of Business:**

**Current Mailing Address:**

13815 21ST STREET  
DADE CITY, FL 33525

**New Mailing Address:**

FEI Number: 59-2984898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMAS, CLAUDE E  
36827 PALM STREET  
DADE CITY, FL 32355 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: DP ( ) Delete  
Name: THOMAS, CLAUDE E  
Address: 36827 PALM ST.  
City-St-Zip: DADE CITY, FL 33525

Title: DVP ( ) Delete  
Name: THOMAS, WADE  
Address: 25807 APPLEBLOSSOM LA.  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: ST ( ) Delete  
Name: THOMAS, LAURIE KAYE  
Address: 36827 PALM ST.  
City-St-Zip: DADE CITY, FL 33525

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: CLAUDE E. THOMAS

DP

02/26/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date