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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 L93916 **DOCUMENT #**

(9)

1. Corporation Name GREG THOMAS, INC.

Mailing Address



| LEESBURG FL | BOX 492722 34749-2722 | POST OFFICE BOX 49 LEESBURG FL 34749-2 | | | 3. Date Incorporated or Qualified 07/18/1990 | 3a. Date of Last Rep 04/10/199 | 5 |
|--|--|---|--|--|--|-----------------------------------|-----------------------------|
| L. Tillopar toos of Essay | | 2a. Mailing Address | 1 | | 4. FEI Number Applied Fo S9-3023675 Not Applied | | pplied For ot Applicable |
| | | Suite, Apt. #, etc. | | | | \$8.75 | Additional |
| Suite, Apt. #, i | etc. | 27 | | | 5. Certificate of Status Desired | Fee R | equired |
| City & State | | City & State | | | 6. Election Campaign Financing | 1 1 | May Be |
|] | | 28 | | | Trust Fund Contribution | Added | to Fees |
| Zφ | Country | Zip | Gountr 30 | У | B. This corporation has liability for i Florida Statutes | No | 100.002 |
| <u> </u> | 9. Name and Address of Current | t Registered Agent | 30 | | 10. Name and Address of New R | | |
| | 9. Name and Address of Collect | i negistered ngont | 8 | 1 Name | | | |
| SEWELL. | STEPHEN G. | | 8 | 2 Street Add | ress (P.O. Box Number is Not Acceptab | ile) | |
| 907 WEB | STER ST. | | | l | | | |
| LEESBUR | RG FL 34748 | | 8 | 3 | | | |
| | | | 8 | 4 City | | Fi 85 Zip | Code |
| SIGNATURE | ignature, typed or printed mane of registered agost | | | prot signature requir | ad while revisible(f) ADDITIONS/CHANGES TO OFF | DATE | RS IN 12 |
| 12. | OFFICERS AND | D DIRECTORS DELETE | 13. | F | ADDITIONS OF PARSES AS EX | ☐ Change | Addition |
| TITLE | DP | | 1 1 11/4 | `` | | | |
| | THOMAS GREGORY O | | 1.2 NAM | 16 | | | |
| | THOMAS, GREGORY O. | | 1.2 NAM 1.3 STRI | IE EFT ADDRESS | | | |
| STREET ADDRESS | THOMAS, GREGORY O. 04207 BAIR AVE. FRUITLAND PARK FL | | 1 3 STRI | | | | |
| STHEET ADDRESS CHY-ST-ZIP | 04207 BAIR AVE. | DELETE | 1 3 STRI | EFT ADDRESS | | Change | ☐ Addition |
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Foo nereby certify that the information supplied with this litting is voluntarily formshed and does not quarry to the exemption stated in Section 1.19-0 (ppt). Forms of stated exercity 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 offect 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

NAME OF SIGNING OFFICER OR DIRECTOR DO THOMAS 4-14- 96 352-326-5445