

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M77871

Entity Name: THOR GUARD, INC.

FILED  
Mar 11, 2009  
Secretary of State

## Current Principal Place of Business:

1193 SAWGRASS CORP. PWY.  
SUNRISE, FL 33323 US

## New Principal Place of Business:

1193 SAWGRASS CORP. PARKWAY  
SUNRISE, FL 33323 US

## Current Mailing Address:

1193 SAWGRASS CORP. PWY.  
SUNRISE, FL 33323 US

## New Mailing Address:

1193 SAWGRASS CORP. PARKWAY  
SUNRISE, FL 33323 US

FEI Number: 65-0057716

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TOWNSEND, PETER L. SR.  
1193 SAWGRASS CORP. PKWY  
SUNRISE, FL 33323 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: CEO ( ) Delete  
Name: TOWNSEND, PETER L SR.  
Address: 1193 SAWGRASS CORP. PARKWAY  
City-St-Zip: SUNRISE, FL 33323

Title: VDAS ( ) Delete  
Name: MILLER, R A  
Address: 1193 SAWGRASS CORP. PKWY  
City-St-Zip: SUNRISE, FL 33323

Title: PD ( ) Delete  
Name: DUGAN, ROBERT  
Address: 1193 SAWGRASS CORP. PKWAY  
City-St-Zip: SUNRISE, FL 33323

Title: SD ( ) Delete  
Name: PERSING, DAVID  
Address: 21 MAIN ST. 2ND FLOOR  
City-St-Zip: HACKENSACK, NJ 07601

## 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:

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: RA MILLER

VP

03/11/2009

Electronic Signature of Signing Officer or Director

Date