2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003149

Entity Name: THOMPSON-HARTFORD FOUNDATION, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11705 BOYETTE ROAD 101 E MAHONEY ST #450 PLANT CITY, FL 33563

RIVERVIEW, FL 33569

Current Mailing Address: New Mailing Address:

P O BOX 2476 PO BOX 2448

BRANDON, FL 335092476 PLANT CITY, FL 335642448

FEI Number: 20-4662640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATE CREATIONS NETWORK INC.

11380 PROSPERITY FARMS ROAD #221E

PALM BEACH GARDENS, FL 33410 US

THOMPSON, NYLAH J DPS

101 E MAHONEY ST

PLANT CITY, FL 335642448 US

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: NYLAH J THOMPSON, DPS 04/01/2009

Electronic Signature of Registered Agent Date

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

Title: DPS () Delete Title: DPS (X) Change () Addition

Name: THOMPSON, NYLAH J Name: THOMPSON, NYLAH J DPS
Address: PO BOX 2476 Address: PO BOX 2448

City-St-Zip: BRANDON, FL 33509 City-St-Zip: PLANT CITY, FL 335642448

Title: D () Delete Title: D (X) Change () Addition Name: MCNICHOLAS, LISA M Name: MCNICHOLAS, LISA M

Name: MCNICHOLAS, LISA M
Address: PO BOX 2476

Name: MCNICHOLAS, LISA M
Address: PO BOX 2448

City-St-Zip: BRANDON, FL 33509 City-St-Zip: PLANT CITY, FL 335642448

Title: DVPT () Delete Title: DVPT (X) Change () Addition

Name: HARTFORD, H.L. Name: HARTFORD, H.L.

Address: PO BOX 2476 Address: PO BOX 2448

City-St-Zip: BRANDON, FL 33509 City-St-Zip: PLANT CITY, FL 335642448

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NYLAH J THOMPSON DPS 04/01/2009