

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22259

FILED
Apr 12, 2010
Secretary of State

Entity Name: THRASHER WAREHOUSE PRESERVATION, INC.

Current Principal Place of Business:

605 CHOLOKKA BLVD.
MICANOPY, FL 32667 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 26
MICANOPY, FL 32667 US

New Mailing Address:

FEI Number: 59-2907378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLEY, EDWARD L.
1301 GULF LIFE DR
JACKSONVILLE, FL 32207 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

OFFICERS AND DIRECTORS:

Title: PD
Name: DES FORGES, BUD
Address: 554 SEMINARY ST
City-St-Zip: MICANOPY, FL 32667

Title: SD
Name: THRASHER, JOHN E.
Address: 6424 SE 169TH AVENUE
City-St-Zip: MICANOPY, FL 32667

Title: VD
Name: JOBES, THOMAS
Address: 402 S.E. TUSCAWILLA ROAD
City-St-Zip: MICANOPY, FL 32667

Title: D
Name: LONAS, GEORGE
Address: 1922 SOUTHWEST 83RD COURT
City-St-Zip: GAINESVILLE, FL 32607

Title: TD
Name: STILL, JOSEPH
Address: 18009 SE COUNTY RD # 234
City-St-Zip: MICANOPY, FL 32667

Title: D
Name: DROUIN, ANDRE
Address: 15160 N.W. HWY. 320
City-St-Zip: GAINESVILLE, FL 32607

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

SIGNATURE: JOSEPH STILL

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04/12/2010

Electronic Signature of Signing Officer or Director

Date