2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001560

FILED Jan 11, 2005 Secretary of State

Entity Name: THE C. FREDERICK THOMPSON FOUNDATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2831 NW STE D	41ST STREET				
	ILLE, FL 3260	6			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2831 NW STE D	41ST STREET				
GAINESV	'ILLE, FL 3260	6			
FEI Numbe	r: 59-3380217	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address o	of New Registered Agent:	
THOMPSON, C. FREDERICK 104 N. MAIN ST., STE. 300 GAINESVILLE, FL 32601 US			2831 NW 41 STREET SUITE D		
	e named entity te of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				01/11/2005	
	Electron	nic Signature of Registered Ag	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address:	D (THOMPSON, S 2831 NW 41ST) Delete COTT C STREET STE D	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTOR () Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	D (THOMPSON, S 2831 NW 41ST GAINESVILLE, D (THOMPSON, G 2831 NW 41ST) Delete COTT C - STREET STE D FL 32606) Delete GRANT M - STREET STE D	Title: Name: Address:		
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	D (THOMPSON, S 2831 NW 41ST GAINESVILLE, D (THOMPSON, G 2831 NW 41ST GAINESVILLE, TD (THOMPSON, A 2813 NW 41ST) Delete COTT C STREET STE D FL 32606) Delete SRANT M STREET STE D FL 32606) Delete ASE B. STREET STE D	Title: Name: Address: City-St-Zip: Title: Name: Address:	· · · · · · · · · · · · · · · · · · ·	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AASE B. THOMPSON TD 01/11/2005