

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2008 8:00 am
Secretary of State

08-08-2008 90017 014 ****61.25

DOCUMENT # N98000005227 1. Entity Name EUGENE & MARY THOMPSON, INC.																																																																																																																	
Principal Place of Business 6021 NW 6TH COURT MIAMI, FL 33127 US			Mailing Address P O BOX 472673 MIAMI, FL 33247 US																																																																																																														
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																																															
City & State		City & State																																																																																																															
Zip	Country	Zip	Country		4. FEI Number 65-0863986																																																																																																												
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable																																																																																																													
6. Name and Address of Current Registered Agent THOMPSON, EUGENE 6033 NW 6TH COURT MIAMI, FL 33127				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																													
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																	
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE																																																																																																																	
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																																																																																																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">PD THOMPSON, EUGENE</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">6033 NW 6TH COURT</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">MIAMI, FL 33127</td> </tr> <tr> <td>TITLE</td> <td>VP THOMPSON, MARY</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">451 NW 7TH STREET</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">MIAMI, FL 33136</td> </tr> <tr> <td>TITLE</td> <td>TD THOMPSON, ROSALIE</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">6033 NW 6TH CT</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">MIAMI, FL 33127</td> </tr> <tr> <td>TITLE</td> <td>TD CLAYTON, RUDOLPH</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">13051 SW 282ND STREET</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">HOMESTEAD, FL 33031</td> </tr> <tr> <td>TITLE</td> <td>SD TRIBBLE, JEANETTE</td> <td style="text-align: right;">☒ Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">12001 SW 213 STREET</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">MIAMI, FL 33170</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">VP Thompson, Mary</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">6033 NW 6th court</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">MIAMI, FL 33127</td> </tr> <tr> <td>TITLE</td> <td>SD Thompson, Rosalie</td> <td style="text-align: right;">☒ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">6033 NW 6th court</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">MIAMI, FL 33127</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table>						TITLE	PD THOMPSON, EUGENE	☐ Delete	NAME			STREET ADDRESS	6033 NW 6TH COURT		CITY-ST-ZIP	MIAMI, FL 33127		TITLE	VP THOMPSON, MARY	☐ Delete	NAME			STREET ADDRESS	451 NW 7TH STREET		CITY-ST-ZIP	MIAMI, FL 33136		TITLE	TD THOMPSON, ROSALIE	☐ Delete	NAME			STREET ADDRESS	6033 NW 6TH CT		CITY-ST-ZIP	MIAMI, FL 33127		TITLE	TD CLAYTON, RUDOLPH	☐ Delete	NAME			STREET ADDRESS	13051 SW 282ND STREET		CITY-ST-ZIP	HOMESTEAD, FL 33031		TITLE	SD TRIBBLE, JEANETTE	☒ Delete	NAME			STREET ADDRESS	12001 SW 213 STREET		CITY-ST-ZIP	MIAMI, FL 33170		TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	VP Thompson, Mary	☐ Change ☐ Addition	NAME			STREET ADDRESS	6033 NW 6th court		CITY-ST-ZIP	MIAMI, FL 33127		TITLE	SD Thompson, Rosalie	☒ Change ☒ Addition	NAME			STREET ADDRESS	6033 NW 6th court		CITY-ST-ZIP	MIAMI, FL 33127		TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.																																																																																																																	
SIGNATURE: <u>Eugene Thompson</u> Eugene Thompson 08-04-08 305-756-1733 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																																	