

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90093 007 ****70.00

DOCUMENT # N99000003051

1. Entity Name
THORNHILL ENTERPRISES OF CENTRAL FLORIDA, INC.



Principal Place of Business
11875 HIGH TECH AVENUE STE. 200
ORLANDO, FL 32817

Mailing Address
11875 HIGH TECH AVENUE STE. 200
ORLANDO, FL 32817



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01052007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-3578142	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SHEPPARD, CYRIL 11875 HIGH TECH AVE S-200 ORLANDO, FL 32817		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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE CD	<input type="checkbox"/> Delete WARNER, JONNIE MAE 2400 MAITLAND CENTER PARKWAY, 5-100 MAITLAND, FL 32751	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D	<input type="checkbox"/> Delete PRYOR, CHRISTY 644 RAYMOND AVE ALTA MONTE SPRINGS, FL 32701	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	D PRYOR, CHRISTY 135 INTERNATIONAL PARKWAY HEATHROW, FLORIDA 32746
TITLE D	<input type="checkbox"/> Delete LOFFERT, ALLAN 12150 RESEARCH PARKWAY ORLANDO, FL 32826	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D PROLY, PAUL 610 SYCAMORE STREET CELEBRATION, FLORIDA 34744
TITLE DP	<input type="checkbox"/> Delete SHEPPARD, CYRIL 1538 TRUMBULL STREET KISSIMMEE, FL 34744	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D	<input type="checkbox"/> Delete HIMES, MEL 1200 DELTONA BLVD UNIT 61 DELTONA, FL 32725	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D	<input type="checkbox"/> Delete CHATMAN, JULIA 2500 WEST COLONIAL DRIVE ORLANDO, FL 32804	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: Cyril Sheppard 1/5/07 407-273-8444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #