

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041572

FILED
Jan 04, 2005
Secretary of State

Entity Name: BUD THOMAS AND ASSOCIATES INC.

Current Principal Place of Business:

3912 N. FEDERAL HWY.
POMPANO BCH, FL 33064

New Principal Place of Business:

Current Mailing Address:

3912 N. FEDERAL HWY.
POMPANO BCH, FL 33064

New Mailing Address:

FEI Number: 65-1007532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, BUD
3912 N. FEDERAL HWY.
POMPANO BCH, FL 33064 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMAS, BUD
Address: 5663 LAKESHORE VILLAGE CIR.
City-St-Zip: LAKE WORTH, FL 33463

Title: VSTD () Delete
Name: THOMAS, CECILIA
Address: 5663 LAKESHORE VILLAGE CIR.
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: BUD THOMAS

PD

01/04/2005

Electronic Signature of Signing Officer or Director

Date