

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90093 037 ***150.00

DOCUMENT # P00000058589

1. Entity Name
THUNDERCLOUD AGRICULTURE, INC.

Principal Place of Business
**777 S HARBOUR ISLANDS BLVD.
STE 380
TAMPA FL 33802**

Mailing Address
**777 S HARBOUR ISLANDS BLVD.
STE 380
TAMPA FL 33802**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3659865

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~HUBBARD J. JACKSON~~
~~10000 XXXXXXXXXX~~
~~501 EAST KENNEDY BLVD.~~
~~SMITH TOWN~~
~~TAMPA FL 33602~~

Name
Robert A. Walter
Street Address (P.O. Box Number is Not Acceptable)
777 South Harbour Island Blvd.
Suite 360
City
Tampa FL Zip Code
33602

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.

SIGNATURE: Robert A. Walter Robert A. Walter 1/15/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **WALTER, JAMES W. JR.**
CITY-ST-ZIP **1400 MORRIS STREET**
TAMPA FL 33602

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **WALTER, ROBERT A**
CITY-ST-ZIP **777 A HARBOUR ISLAND BLVD, STE 360**
TAMPA FL 33609

TITLE ☐ Change ☒ Addition
NAME **President**
STREET ADDRESS **Robert A. Walter**
CITY-ST-ZIP **777 S. Harbour Island Blvd. #360**
Tampa, FL. 33602

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert A. Walter **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/02 813-221-9782
Date Daytime Phone #

CR2E034 (9/01)