

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 12, 2006 08:00 AM**  
**Secretary of State**

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



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3659865

Applied  
Not App

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

WALTER, ROBERT A  
777 SOUTH HARBOUR ISLAND BLVD  
SUITE 360  
TAMPA, FL 33602

**DO NOT WRITE  
IN THIS SPACE**

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 c 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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000392814

01/12/06-20028-016 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	WALTER, ROBERT A
STREET ADDRESS	777 S HARBOUR ISLAND BLVD. #360
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	D
NAME	WALTER, ROBERT A
STREET ADDRESS	777 A HARBOUR ISLAND BLVD, STE 360
CITY-ST-ZIP	TAMPA, FL 33609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Robert A. Walter*