

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000028127

Entity Name: THOMAS DEVELOPMENT, INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

4414 SEVILLA STREET
TAMPA, FL 33629

New Principal Place of Business:

2203 N. LOIS AVE., SUITE 1125
TAMPA, FL 33607

Current Mailing Address:

4414 SEVILLA STREET
TAMPA, FL 33629

New Mailing Address:

2203 N. LOIS AVE., SUITE 1125
TAMPA, FL 33607

FEI Number: 59-3709694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDRIDGE, HALA A
501 E KENNEDY BLVD SUITE 1700
TAMPA, FL 33602 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: D () Delete
Name: SANDRIDGE, THOMAS J III
Address: 4414 SEVILLA STREET
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: SANDRIDGE, HALA A
Address: 4414 SEVILLA STREET
City-St-Zip: TAMPA, FL 33629

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: THOMAS J. SANDRIDGE, 111

D

04/18/2005

Electronic Signature of Signing Officer or Director

Date