

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 17, 2002 8:00 am**  
**Secretary of State**

09-17-2002 90102 006 \*\*\*150.00

DOCUMENT # *P01000034755*

1. Entity Name

THA COMPUTER CONSULTANTS, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
2016 EL DORADO PKWY W

3. Mailing Address  
2016 EL DORADO PKWY W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
CAPE CORAL FLORIDA

City & State  
CAPE CORAL FLORIDA

4. FEI Number  
65-1089534

Applied For

Not Applicable

Zip  
33914

Country  
UNITED STATES

Zip  
33914

Country  
UNITED STATES

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
TRUMAN H ANDERSON

Street Address (P.O. Box Number is Not Acceptable)

2016 EL DORADO PKWY W

City  
CAPE CORAL

FL

Zip Code  
33914

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

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) ☒

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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

TITLE  
NAME  
P/D  
TRUMAN H ANDERSON  
STREET ADDRESS  
2016 ELDORADO PKWY W  
CITY - ST - ZIP  
CAPE CORAL FLORIDA 33914  
*CAPE CORAL FL 33914*

TITLE  
NAME  
S/D  
AILEEN M ANDERSON  
STREET ADDRESS  
2016 ELDORADO PKWY W  
CITY - ST - ZIP  
CAPE CORAL FLORIDA 33914  
*CAPE CORAL FL 33914*

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED34B (12/01)



Attachment

2016 El Dorado Parkway, West  
Cape Coral, Florida, 33914  
(941) 540-0064

872295

# PD1000034755

09/13/2002

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
409 EAST GAINES STREET  
TALLAHASSEE, FL 32399

To Whom It May Concern:

This letter is a request for exemption from the late filing fee as this is my first time filing and I did not receive the proper forms in the mail that I needed to file. I had to download them off of the internet.

Sincerely,

A handwritten signature in black ink, appearing to read 'Truman H. Anderson', written over a horizontal line.

Truman H Anderson  
President/CEO

THA COMPUTER CONSULTANTS Inc.