

07-15-2008 90062 036 \*\*\*150.00

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FILED

08 AUG 14 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1st MOORE CR2E034 (10/07)

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT (AR)**

<b>DOCUMENT # P01000118854</b>					
1. Entity Name <b>THIBODEAU CONSTRUCTION SERVICES, INC.</b>					
Principal Place of Business <b>136 BILBAO ST ROYAL PALM BEACH FL 33411</b>			Mailing Address <b>P.O. BOX 212785 ROYAL PALM BEACH FL 33721</b>		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State		City & State		4. FEI Number <b>01-0551829</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>COREY, MICHAEL 136 BILBAO STREET ROYAL PALM BEACH FL 33411</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when submitting)</small>					
DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COREY, MICHAEL			NAME	
STREET ADDRESS	136 BILBOA STREET			STREET ADDRESS	
CITY- ST- ZIP	ROYAL PALM BEACH FL 33411			CITY- ST- ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY- ST- ZIP				CITY- ST- ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY- ST- ZIP				CITY- ST- ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY- ST- ZIP				CITY- ST- ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY- ST- ZIP				CITY- ST- ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 if changed, or on an attachment with an address, with a written line empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date: <b>7/9/08</b> 561-649-4642					

Thibodeau Construction Services  
P.O. Box 212785  
Royal Palm Bch, FL 33421

Re: Florida Department of state  
Division of Corporations

Thibodeau Construction did not receive Document #P 01000118854 in the mail so I called up and asked one could be mailed this all happened after May 1, 2008 This is letter asking to wave the 400.00 late fee.

CC:  
Karen Sally

Per conversation: Did NOT RECEIVE AR NOTICES

Thibodeau Construction  
Michael Corey

