

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000018929

FILED
Jun 27, 2007
Secretary of State

Entity Name: THOMPSON ELECTRIC SUPPLY INC.

Current Principal Place of Business:

PO BOX 1469
EATON PARK, FL 33840

New Principal Place of Business:

5054 KIRKLAND RD
LAKELAND, FL 33811

Current Mailing Address:

PO BOX 1469
EATON PARK, FL 33840

New Mailing Address:

FEI Number: 59-3341546 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THOMPSON, DARRELL
5054 KIRKLAND RD
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

THOMPSON, DARRELL E OWNER
5054 KIRKLAND RD
LAKELAND, FL 33811 US

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: DARRELL THOMPSON

Electronic Signature of Registered Agent

06/27/2007

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMPSON, DARRELL
Address: PO BOX 1469
City-St-Zip: EATON PARK, FL 33840

Title: ST () Delete
Name: THOMPSON, WENDY
Address: PO BOX 1469
City-St-Zip: EATON PARK, FL 33840

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OWNE (X) Change () Addition
Name: THOMPSON, DARRELL E OWNER
Address: PO BOX 1469
City-St-Zip: EATON PARK, FL 33840

Title: C/O (X) Change () Addition
Name: THOMPSON, WENDY A C/OWNER
Address: PO BOX 1469
City-St-Zip: EATON PARK, FL 33840

Title: TRES () Change (X) Addition
Name: GILL, VIRGIL G TRESURE
Address: PO BOX 684
City-St-Zip: EATON PARK, FL 33840

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DARRELL THOMPSON

Electronic Signature of Signing Officer or Director

OWNE

06/27/2007

Date