


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

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90038 003 ***150.00

DOCUMENT # P03000037590	
1. Entity Name THETFORD PROPERTIES, INC.	

DO NOT WRITE IN THIS SPACE

54013598

2. Principal Place of Business 109 OPP BLVD.		3. Mailing Address 109 OPP BLVD.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State FT. WALTON BEACH, FL.	City & State FT. WALTON BEACH, FL.	4. FEI Number 68-0549408	Applied For <input type="checkbox"/> Not Applicable
Zip 32548	Country USA	Zip 32548	Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name ROBERT B. THETFORD JR.	
	Street Address (P.O. Box Number is Not Acceptable) 940 SANTA ROSA BLVD.	
	APT. # 1124	
City FT. WALTON BEACH, FL		Zip Code 32548

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERT S. THETFORD 109 OPP BLVD. FT. WALTON BEACH, FL. 32548	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T ROBERT B. THETFORD JR 940 SANTA ROSA BLVD. #1124 FT. WALTON BEACH, FL. 32548	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert B. Thetford Jr.
ROBERT B. THETFORD JR./SEC/TREAS

2-27-04

Date

850 243-5477

Daytime Phone #

CR2ED34B (12/02)