

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000098771

1. Entity Name
GAETAN THOMASSIN, INC.



SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 20 PM 1:45

Principal Place of Business
1767, LAKEWOOD RANCH BLVD
#162
BRADENTON, FL 34211

Mailing Address
1767, LAKEWOOD RANCH BLVD
#162
BRADENTON, FL 34211



2. Principal Place of Business

3. Mailing Address

09072006 Chg-P CR2E034 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
90-0107843

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMASSIN, GAETAN
1767, LAKEWOOD RANCH BLVD.
#162
BRADENTON, FL 34211

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME THOMASSIN, GAETAN
STREET ADDRESS 1767, LAKEWOOD RANCH BLVD, #162
CITY-ST-ZIP BRADENTON, FL 34211 ☐ Delete

TITLE PSTD
NAME 200080259062
STREET ADDRESS 09/28/06--01049--020 **\$61.25
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE V
NAME THIBAUT, GISELE
STREET ADDRESS 1767, LAKEWOOD RANCH BLVD
CITY-ST-ZIP BRADENTON, FL 34211 ☒ Delete

TITLE V
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE V
NAME DAVID COSBEY
STREET ADDRESS 9635 E. RY RD
CITY-ST-ZIP PARRISH FL 34219 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered. GAETAN THOMASSIN

SIGNATURE: X *GAETAN THOMASSIN*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRES

9/ /06 300-4672

Date

Daytime Phone #