

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 11, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P03000103041**

1. Entity Name  
**HOWARD THURSBY CONSTRUCTION COMPANY**



Principal Place of Business  
**249 SHELIN DR  
HAVANA, FL 32333**

Mailing Address  
**249 SHELIN DR  
HAVANA, FL 32333**



02262008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-0599884</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**THURSBY, HOWARD C  
249 SHELIN DR  
HAVANA, FL 32333**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

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	CEO THURSBY, HOWARD C 249 SHELIN DR HAVANA, FL 32333
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO THURSBY, PAMELA B 249 SHELIN DR HAVANA, FL 32333
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03/27/08-80053-006 150.00

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:** *Howard C. Thursty* **HOWARD C. THURSBY** **03/10/08** **850-539-5897**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR Date Daytime Phone #