

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000116925

**FILED**  
**Mar 26, 2011**  
**Secretary of State**

**Entity Name:** LARRY THRALL GENERAL CONTRACTOR, INC.

**Current Principal Place of Business:**

504 MARLOWE DRIVE  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

504 MARLOWE DRIVE  
FORT WALTON BEACH, FL 32547

**New Mailing Address:**

**FEI Number:** 06-1711448

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

THRALL, LARRY A  
504 MARLOWE DRIVE  
FORT WALTON BEACH, FL 32547 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: THRALL, LARRY A  
Address: 504 MARLOWE DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VP  
Name: THRALL, TIMOTHY  
Address: 67 WAYNELL CIRCLE  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TR  
Name: THRALL, SUANN  
Address: 504 MARLOWE DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

I hereby 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 all other like empowered.

SIGNATURE: LARRY A THRALL

PRES

03/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date