

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000130257

1. Entity Name
STEVE THOMPSON CUSTOM TRIM AND CABINETS INC.



Principal Place of Business
744 BROOKEDGE TERRACE
SEBASTIAN, FL 32958 US

Mailing Address
744 BROOKEDGE TERRACE
SEBASTIAN, FL 32958 US



01182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0488382

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

THOMPSON, STEPHEN P
744 BROOKEDGE TERRACE
SEBASTIAN, FL 32958

**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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000615025
02/06/07-80055-006 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME THOMPSON, STEPHEN P
STREET ADDRESS 744 BROOKEDGE TERRACE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE VP
NAME THOMPSON, STEPHEN P
STREET ADDRESS 744 BROOKEDGE TERRACE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE S
NAME THOMPSON, STEPHEN P
STREET ADDRESS 744 BROOKEDGE TERRACE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE T
NAME THOMPSON, STEPHEN P
STREET ADDRESS 744 BROOKEDGE TERRACE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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:

Stephen P. Thompson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 29, 2007 712-633-7867

Date

Daytime Phone #