


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000148268</b> 1. Entity Name THOMAS BOSTICK CONSTRUCTION, INC.	
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Principal Place of Business 219 N 10TH AVENUE WAUCHULA, FL 33873	Mailing Address 219 N 10TH AVENUE WAUCHULA, FL 33873
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**DO NOT WRITE IN THIS SPACE**



03102007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0523292	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BOSTICK, THOMAS M 219 N 10TH AVENUE WAUCHULA, FL FL
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**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 Thomas Bostick THOMAS BOSTICK 3/14/07  
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. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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U000000673479  
03/29/07-80030-012 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOSTICK, THOMAS M 219 N 10TH AVENUE WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOSTICK, PATSY D 219 N 10TH AVENUE WAUCHULA, FL 33873
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**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: Thomas Bostick THOMAS BOSTICK 3/14/07 8637734075  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #