2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# P03000150091

Entity Name: LEW THOMPSON MANAGEMENT COMPANY

Current Principal Place of Business:

1400 SONATA COURT
NAVARRE, FL 32566

New Principal Place of Business:

PO BOX 6028
NAVARRE, FL 32566

Current Mailing Address:

915 BLUFFSIDE DR.
HUNTSVILLE, AR 72740

New Mailing Address:

FEI Number: 71-0811505 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CATCHUR, MARK A
101 EAST KENNEDY BLVD.
SUITE 2800
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: THOMPSON, BOBBY W
Address: 1400 SONATA COURT
City-St-Zip: NAVARRE, FL 32566

Title: D ( ) Delete
Name: THOMPSON, JACKIE
Address: 1400 SONATA COURT
City-St-Zip: NAVARRE, FL 32566

Title: P ( ) Delete
Name: THOMPSON, BOBBY W
Address: 1400 SONATA COURT
City-St-Zip: NAVARRE, FL 32566

Title: S ( ) Delete
Name: THOMPSON, JACKIE
Address: 1400 SONATA COURT
City-St-Zip: NAVARRE, FL 32566

Title: T ( ) Delete
Name: THOMPSON, JOSH
Address: 1400 SONATA COURT
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: THOMPSON, BOBBY W
Address: PO BOX 6028
City-St-Zip: NAVARRE, FL 32566

Title: D (X) Change ( ) Addition
Name: THOMPSON, JACKIE
Address: PO BOX 6028
City-St-Zip: NAVARRE, FL 32566

Title: P (X) Change ( ) Addition
Name: THOMPSON, BOBBY W
Address: PO BOX 6028
City-St-Zip: NAVARRE, FL 32566

Title: S (X) Change ( ) Addition
Name: THOMPSON, JACKIE
Address: PO BOX 6028
City-St-Zip: NAVARRE, FL 32566

Title: T (X) Change ( ) Addition
Name: THOMPSON, JOSH
Address: PO BOX 6028
City-St-Zip: NAVARRE, FL 32566

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BOBBY W THOMPSON D 04/13/2006

Electronic Signature of Signing Officer or Director — Date