## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000154421

Entity Name: THOMPSON OF NORTH FLORIDA, INC.

FILED Jan 31, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	of Business:	
	A AVENUE VILLE, FL 32	210			
Current Mailing Address:			New Mailing Address:		
	A AVENUE  VILLE, FL 32:	210			
FEI Number:	: 20-0516062	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
2220 VIST.	ON, JACOB A A AVENUE VILLE, FL 32	210 US			
	named entity of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( THOMPSON, J 2220 VISTA AV JACKSONVILL	/ENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPST ( THOMPSON, S 2220 VISTA AV JACKSONVILL	/E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JACOB A THOMPSON PD 01/31/2006