2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2011
Secretary of State

DOCUMENT# P03000154421

Entity Name: THOMPSON OF NORTH FLORIDA, INC.

Current Principal Place of Business:

2220 VISTA AVENUE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

5259 ALL OAKS CT
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 20-0516062 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THOMPSON, SHERI
2220 VISTA AVENUE
JACKSONVILLE, FL 32210 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: THOMPSON, JACOB A
Address: 5259 ALL OAKS CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: VPST
Name: THOMPSON, SHERI
Address: 5259 ALL OAKS CT
City-St-Zip: JACKSONVILLE, FL 32258

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: SHERI THOMPSON VP 02/19/2011

Electronic Signature of Signing Officer or Director Date