

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053169

FILED
Apr 25, 2005
Secretary of State

Entity Name: DONALD THOMPSON ASSOCIATES INC.

Current Principal Place of Business:

PO BOX 549, 108 GLORIA DRIVE
HOLLISTER, FL 32147

New Principal Place of Business:

Current Mailing Address:

PO BOX 549, 108 GLORIA DRIVE
HOLLISTER, FL 32147

New Mailing Address:

P. O. BOX 549
108 GLORIA DRIVE
HOLLISTER, FL 32147

FEI Number: 20-0938393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301 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: PD () Delete
Name: THOMPSON, DONALD
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

Title: VP () Delete
Name: OGLE, APRIL
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

Title: S () Delete
Name: THOMPSON, LINDA
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

Title: T () Delete
Name: GREEN, TWYLA
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: OGLE, APRIL
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

Title: P (X) Change () Addition
Name: THOMPSON, DONALD
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

Title: V (X) Change () Addition
Name: THOMPSON, LINDA
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

Title: S (X) Change () Addition
Name: GREEN, TWYLA
Address: PO BOX 549, 108 GLORIA DRIVE
City-St-Zip: HOLLISTER, FL 32147

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONALD L. THOMPSON

PRE

04/25/2005

Electronic Signature of Signing Officer or Director

Date