

2005

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90401 048 ***150.00

DOCUMENT #

P04000136321

Entity Name

Frederick Thomas, Inc.

DO NOT WRITE IN THIS SPACE

14013553

Principal Place of Business

12307 River Rd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Myers FL

City & State

4. FEI Number

55-0884633

Applied For

Not Applicable

Zip

33905

Country

Zip

Country

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Frederick Thomas

Street Address (P.O. Box Number is Not Acceptable)

12307 River Road

City

Ft. Myers

FL

Zip Code

33905

DO NOT WRITE
IN THIS SPACE

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

Frederick Thomas

F.W. THOMAS (By D.T.)

4/27/05

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

LE ME REET ADDRESS Y-ST-ZIP	President / Director Frederick Thomas 12307 River Rd. Ft. Myers, FL 33905	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
LE ME REET ADDRESS Y-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
LE ME REET ADDRESS Y-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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LE ME REET ADDRESS Y-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

I hereby certify that the information supplied with this filing does not qualify 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Frederick Thomas

F.W. THOMAS (By D.T.) 4/27/05

Pres.

CR2E034B (12/01)