## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000011734

Entity Name: THOMAS FAMILY MANAGEMENT CORP

FILED Mar 07, 2009 Secretary of State

Littly Nai	ile. THOWASTAWILT	WANAGEWENT CO	NF.			
Current Principal Place of Business:			New Principal	New Principal Place of Business:		
	UM PLACE SUITE 801 LM BEACH, FL 33401	US	1601 FORUM F 801 WEST PALM B	PLACE BEACH, FL 33401	US	
Current M	ailing Address:		New Mailing A	New Mailing Address:		
	UM PLACE SUITE 801 LM BEACH, FL 33401	US	1601 FORUM F 801 WEST PALM B	PLACE BEACH, FL 33401	US	
FEI Number:	: 20-2223974 FEI Num	ber Applied For()	FEI Number Not Applicabl	e ( ) Certificate	of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Add	Name and Address of New Registered Agent:		
1601 FOR	DAVID J III UM PLACE SUITE 801 LM BEACH, FL 33401	US	1601 FOŔUM F 801	THOMAS, DAVID J III 1601 FORUM PLACE 801 WEST PALM BEACH, FL 33401 US		
The above in the State	named entity submits the of Florida.	is statement for the	purpose of changing its re	gistered office or reg	istered agent, or both,	
SIGNATURE:				03/07/2009		
	Electronic Signatu	re of Registered Ag	ent	Da	ate	
Election Car	npaign Financing Trust Fun	d Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSD ( ) Delete THOMAS, BROOK C 11850 CARNEGIE PLACE PALM BEACH GARDENS, I	FL 33412 US	Title: Name: Address: City-St-Zip:	( ) Change ( )	Addition	
Title: Name: Address: City-St-Zip:	VTD ( ) Delete THOMAS, DAVID J III 7782 CANNON BALL RD PALM BEACH GARDENS, I	FL 33418 US	Title: Name: Address: City-St-Zip:	( ) Change()	Addition	

I hereby certify that the information supplied with this filing does not qualify 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: DAVID J THOMAS VTD 03/07/2009