2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2009
Secretary of State

DOCUMENT# P06000069550

Entity Name: THOUGHT STATION INC

Current Principal Place of Business:

14472 HUNTCLIFF PKWY
ORLANDO, FL 32824

New Principal Place of Business:

2720 BOAT COVE CIRCLE
KISSIMMEE, FL 34746

Current Mailing Address:

14472 HUNTCLIFF PKWY
ORLANDO, FL 32824

New Mailing Address:

2720 BOAT COVE CIRCLE
KISSIMMEE, FL 34746

FEI Number: 13-4333797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HINOJOSA, ALMA L
14472 HUNTCLIFF PKWY
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

HINOJOSA, ALMA L
2720 BOAT COVE CIRCLE
KISSIMME, FL 34746 US

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: ALMA L. HINOJOSA 06/17/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SCHULTE, CARL H
Address: 14472 HUNTCLIFF PKWY
City-St-Zip: ORLANDO, FL 32824

Title: S ( ) Delete
Name: HINOJOSA, ALMA L
Address: 14472 HUNTCLIFF PKWY
City-St-Zip: ORLANDO, FL 32824

Title: VP ( ) Delete
Name: PARKHURST, BILL
Address: 1500 W HWY 318
City-St-Zip: WILLISTON, FL 32696

Title: VP ( ) Delete
Name: THOMAS, JOHN
Address: 291 VICEROY TERRACE
City-St-Zip: PT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SCHULTE, CARL H
Address: 2720 BOAT COVE CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: S (X) Change ( ) Addition
Name: HINOJOSA, ALMA L
Address: 2720 BOAT COVE CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ALMA L. HINOJOSA MRS 06/17/2009
Electronic Signature of Signing Officer or Director Date