

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24961 (5)

1. Corporation Name

J.C. THOMPSON & ASSOCIATES, INC.



Principal Place of Business

7311 W. CYPRESSHEAD DR.
SUITE 300
PARKLAND FL 33067
US

Mailing Address

7311 W. CYPRESSHEAD DR.
SUITE 300
PARKLAND FL 33067
US

3. Date Incorporated or Qualified
06/22/1989

3a. Date of Last Report
01/26/1995

2. Principal Place of Business

2a. Mailing Address

21 5516 Lake Tern Court

26 Same

4. FEI Number
22-2418957

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23 Coconut Creek, FL

City & State

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☒ No

Zip

Country

Zip

Country

24 33073

25 Broward

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMPSON, JOHN C.

7311 W. CYPRESSHEAD DR.

SUITE 300

PARKLAND FL 33067

81 Name Thompson, John C.

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

83 5516 Lake Tern Court

84 City Coconut Creek,

FL

85 Zip Code 33073

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

April 26, 1996

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME THOMPSON, JOHN C.
STREET ADDRESS 7311 W. CYPRESSHEAD DR
CITY-ST-ZIP PARKLAND FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Thompson, John C.

P.D., T.

5516 Lake Tern Court

Coconut Creek, FL 33073

TITLE S ☐ DELETE

NAME THOMPSON, MARIE H.
STREET ADDRESS 7311 W. CYPRESSHEAD DR
CITY-ST-ZIP PARKLAND FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Thompson, Marie H.

S.

5516 Lake Tern Court

Coconut Creek, FL 33073

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

President

4/26/96

(954) 341-8416

CR2E034 (12/95)