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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000065435 (8)

1. Corporation Name PHILIP C. THOMAS, INC. Principal Place of Business 1201 N MISSOURI AVE LARGO FL 34840 US 1202 LARGO FL 34840 US								
UV					Date Incorporated or Qualified 09/15/1993		te of Last R 4/1996	eport
	ace of Business	2a. Mailing Address			4, FEI Number	<u> </u>		oplied For
Suite, Apt	# etc	26			59-3201746		\$8.75	ot Applicable
2	,	27			5. Certificate of Status Desired			beriupe
City & State)	City & State			6. Election Campaign Financing	r1		May Be
3 7(p	Country		Count	try	Trust Fund Contribution 8. This corporation has liability for	r intannible		199 032
1337	70 25	29	30		Florida Statutes	Yes [. 103.002,
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New R	egistered #	\gent	
THOMAS, PHILIP C			8	11 Name				
	5 FLINTLOCK DRIVE ARWATER FL 34625		8	Street Add	dress (P.O. Box Number is Not Accepte	able)		-
	THINKING I E WTVEV		8	13	<u> </u>	···.		
			B	4 City			85 Zip	Code_
	مریند در این		ļ			FL	13	3770
office or re agent. Lar	m familiar with, and accept the obli	igations of Section 607.0505.	s authorizeo Florida Statul	by the corpora tes.	ation's board of directors. I hereby according	ept the appo	omunent as	
BIGNATURE .	Signature, typied or punted name of registered a	agen; and title if applicable (N	OTE Registered A		poration submits this statement for the ation's board of directors. I hereby account when reinstating)	DATE		
SIGNATURE	Signature, typied or punted name of registered a		OTE Registered A	Agent signature requ		DATE		RS IN 12
Signature , 12.	Signature, tysied or printed name of registered a OFFICERS A	agent and title if applicable (N ND DIRECTORS	OTE Registered A	Agent signature requ	ured when reinstating)	DATE	DIRECTOR	RS IN 12
SIGNATURE	Signature, typical or printed name of regenered a OFFICERS A D THOMAS, PHILIP C 2385 FLINTLOCK DRIVE	agent and title if applicable (N ND DIRECTORS	13. 1.1 11110	Agent signature requ	ured when reinstating)	DATE	DIRECTOR	RS IN 12
SIGNATURE 12. BILE VAME STREEL ADDRESS DITY-ST-ZIP	Signature, tysied or puriled name of regenered a DFFICERS A D THOMAS, PHILIP C 2385 FLINTLOCK DRIVE CLEARWATER FL 34825	ages; and the diapplicable (N ND DIRECTORS DELETE	13. 1.1 TITU 1.2 NAM 1.3 STRE 1.4 CRY	Agent eignature requi	ured when reinstating)	DATE	DIRECTOR Change	RS IN 12
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