

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000050996

Entity Name: THOMPSON BUILDERS, INC.

FILED  
Jan 06, 2011  
Secretary of State

**Current Principal Place of Business:**

1411 N.E. 12TH PLACE  
CAPE CORAL, FL 33909

**New Principal Place of Business:**

**Current Mailing Address:**

1411 N.E. 12TH PLACE  
CAPE CORAL, FL 33909

**New Mailing Address:**

FEI Number: 65-0517149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THOMPSON, DAVID N  
1411 N.E. 12TH PLACE  
CAPE CORAL, FL 33909 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PC  
Name: THOMPSON, DAVID N  
Address: 1411 N.E. 12TH PLACE  
City-St-Zip: CAPE CORAL, FL 33909

Title: VPD  
Name: THOMPSON, SUE A.  
Address: 1411 NE 12 PL  
City-St-Zip: CAPE CORAL, FL 33909

Title: S  
Name: CLARKE, JODI E. T  
Address: 8656 ABRAHAM LN  
City-St-Zip: KNOXVILLE, TN 37931

Title: T  
Name: CLARKE, JODI E. T  
Address: 8656 ABRAHAM LN  
City-St-Zip: KNOXVILLE, TN 37931

I hereby 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 all other like empowered.

SIGNATURE: DAVID N. THOMPSON

PC

01/06/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date