

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000065593 (3)

1. Corporation Name

T. THOMPSON & ASSOC., INC.



Principal Place of Business

Mailing Address

840 SE 22 AVE., #38  
POMPANO BEACH FL 33062  
US

P.O. BOX 1543  
POMPANO BEACH FL 33061

3. Date Incorporated or Qualified

09/07/1994

3a. Date of Last Report

08/21/1995

4. FEI Number

65-0518152

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 305 Pompano Beach Blvd

26 P O Box 1543

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 711

27

City & State

City & State

23 Pompano Beach, FL

28 Pompano Beach, FL

Zip

Country

Zip

Country

24 33062

25 Broward

29 33061

30 Broward

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMPSON, T. J.

840 SE 22 AVE., #38

POMPANO BEACH FL 33062

81 Name

Thompson, T.J.

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

305 Pompano Beach Blvd. #711

83

P O Box 1543

84 City

Pompano Beach

FL

85

Zip Code  
33061

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

*T. J. Thompson*

(NOTE: Registered Agent signature required when re-registering)

6/13/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME THOMPSON, WAYNE  
STREET ADDRESS 1105 CALIBRE VININGS WAY  
CITY - ST - ZIP SMYRNA GA

☐ DELETE

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

P  
Thompson, Wayne  
5040 A Alabama Road  
Roswell, GA 30075

☐ Change ☐ Addition

TITLE VPT  
NAME THOMPSON, RANSALL  
STREET ADDRESS 1105 CALIBRE VININGS WAY  
CITY - ST - ZIP ATLANTA GA

☐ DELETE

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

VPT  
Thompson, Randal  
5040-A Alabama Road  
Roswell, GA 30075

☐ Change ☐ Addition

TITLE S  
NAME THOMPSON, TJ  
STREET ADDRESS 840 SE 22ND AVE 38  
CITY - ST - ZIP POMPANO BEACH FL

☐ DELETE

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

S  
Thompson, T J  
305 Pompano Beach Blvd #711  
Pompano Beach, FL 33062

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

☐ Change ☐ Addition

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

*T. J. Thompson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/96

(954) 941-4231  
Date: File #

CR2E034 (3/96)