

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

305 POMPANO BEACH BLVD
711
POMPANO BEACH FL 33062
US

Mailing Address

PO BOX 1543
POMPANO BEACH FL 33061-1543
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

28

Zip

24

Country

29

Country

30

9. Name and Address of Current Registered Agent

THOMPSON, TJ
305 POMPANO BEACH, BLVD
711
POMPANO BEACH FL 33061

81 Name

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

83 APT 203

84 City

FL 33062

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/22/97

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
THOMPSON, WAYNE
1105 CALIBRE VINGS WAY
SMYRNA GA

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change

Addition

5040B Alabama Road
Roswell GA 30075

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPT
THOMPSON, RANSALL
5040 A ALABAMA RD
ROSWELL GA

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change

Addition

Thompson, Randal

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
THOMPSON, TJ
5040 A ALABAMA RD
ROSWELL GA

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change

Addition

305 Pompano Beach Blvd #203
Pompano Beach, FL 33062

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change

Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

SIGNATURE:

T. Thompson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Apr 29 1997 8:00am
Secretary of State



CR2E034 (9/96)