

Apr 28 05 04:54p

LONDON & ASSOCIATES, P.A.

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90974 041 ***158.75

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P95000025566			
1. Entity Name THOMASON PLUMBING & AIR, INC.			
Principal Place of Business 2920 NW 2 AVENUE 17 BOCA RATON, FL 33431		Mailing Address 2920 NW 2 AVENUE 17 BOCA RATON, FL 33431	
2. Principal Place of Business 584 NW 16 CT		3. Mailing Address 584 NW 16 CT	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State BOCA RATON FL		City & State BOCA RATON FL	
Zip 33486		Zip 33486	
Country PALM BEACH		Country PALM BEACH	
4. FEI Number 65-0568822		Applied For Not Applicable	
5. Certificate of Status Desired -BX-		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FILINGS, INC. 3732 NW 16TH STREET FT LAUDERDALE, FL 33311		7. Name and Address of New Registered Agent Name: FRANCIS M. THOMASON Street Address (P.O. Box Number is Not Acceptable) 584 NW 16 CT City: BOCA RATON FL Zip Code: 33486	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: Francis M. Thomason DATE: 4/28/05 Signature, typed or printed name of registered agent, and file # applicable. (NOTE: Registered Agent signature required when re-registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO THOMASON, FRANCIS M 584 NW 16TH COURT BOCA RATON, FL 33486 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD THOMASON, DIANE E 584 NW 16TH COURT BOCA RATON, FL 33486 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMASON, SCOTT C. 5388 LAKE BLVD DELRAY BEACH, FL 33484 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THOMASON, MARK 2815 SW 5 ST BOYNTON BEACH, FL 33438 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Francis M. Thomason		DATE: 4/28/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	