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FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90163 003 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000025556

1. Corporation Name

DOUGLAS R. THORNBURG, P.A.

Principal Place of Business

100 N BISCAYNE BLVD  
STE 2800  
MIAMI FL 33132  
US

Mailing Address

100 N BISCAYNE BLVD  
STE 2800  
MIAMI FL 33132  
US

2. Principal Place of Business

21 10 S. Broadway

Suite, Apt. #, etc.

22 Suite 600

City & State

23 St. Louis, MO

Zip Country

24 63102

25 US

2a. Mailing Address

26 10 S. Broadway

Suite, Apt. #, etc.

27 Suite 600

City & State

28 St. Louis, MO

Zip Country

29 63102

30 US

9. Name and Address of Current Registered Agent

THORNBURG, DOUGLAS R  
100 N. BISCAYNE BLVD  
SUITE 2800  
MIAMI FL 33132

3. Date Incorporated or Qualified

03/15/1996

4. FEI Number

65-0662940

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 owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Craig Edward Stein, P.A.

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

1164-B Normandy Drive

83

84 City

Miami Beach

FL

85

Zip Code  
33141

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.

Craig Edward Stein

(NOTE: Registered Agent signature required when reinstating)

11/4/99

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST  
NAME THORNBURG, DOUGLAS R  
STREET ADDRESS 2463 PINE TREE DRIVE, PENTHOUSE  
CITY-ST-ZIP MIAMI FL 33140

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

DOUGLAS R. THORNBURG  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/15/99

(314) 241-5950

CR2E034 (11/98)