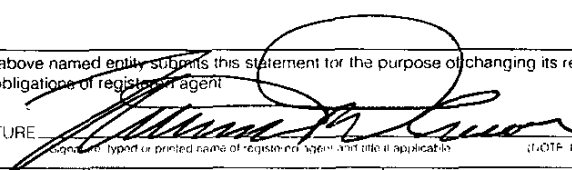
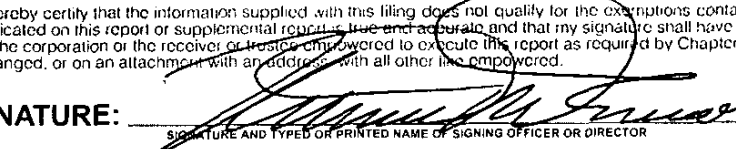


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90014 020 ***150.00

DOCUMENT # P96000051969 1. Entity Name KENNETH B. THOMSON, P.A.																													
Principal Place of Business 101 SOUTHHALL LANE SUITE 400 MAITLAND, FL 32751			Mailing Address 101 SOUTHHALL LANE SUITE 400 MAITLAND, FL 32751																										
2. Principal Place of Business 555 WINDORLEY PLACE Suite, Apt. #, etc. Suite 300 City & State MAITLAND, FL Zip 32751			3. Mailing Address 555 WINDORLEY PLACE Suite, Apt. #, etc. Suite 300 City & State MAITLAND, FL Zip 32751																										
4. FEI Number 59-3384447			Applied For ☐ Not Applicable																										
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required																										
6. Name and Address of Current Registered Agent THOMSON, KENNETH B 101 SOUTHHALL LANE SUITE 400 MAITLAND, FL 32751			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 555 WINDORLEY PLACE, Suite 300 City MAITLAND State FL Zip Code 32751																										
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:  DATE: 2/9/06																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PSD</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>THOMSON, KENNETH B.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>101 SOUTHHALL LANE, STE #400</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MAITLAND, FL</td> <td></td> </tr> </table>			TITLE	PSD	☐ Delete	NAME	THOMSON, KENNETH B.		STREET ADDRESS	101 SOUTHHALL LANE, STE #400		CITY-ST-ZIP	MAITLAND, FL		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">555 WINDORLEY PL, Suite 300</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>MAITLAND, FL 32751</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	555 WINDORLEY PL, Suite 300	☐ Change ☐ Addition	NAME	MAITLAND, FL 32751		STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 lines empowered.																													
SIGNATURE:  DATE: 2/9/06 407-571-6888 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													