

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000068113** (L)

1. Entity Name

THOMPSON ~~TRADING~~ CO.



FILED

03 JUN 26 PM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

257 AMBER ST

3. Mailing Address

257 AMBER ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PENSACOLA, FL

City & State

PENSACOLA, FL

Zip

32503

Country

ESCAMBIA

Zip

32503

Country

ESCAMBIA

4. FEI Number

59-3397942

Applied For

Not Applicable

5. Certificate of Status Desired ☒ ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CHARLES LIBERIS

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

1610 BARRANCAS AVE.

City

PENSACOLA

FL

Zip Code

32501

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	PRESTON THOMPSON
STREET ADDRESS	257 AMBER ST
CITY - ST - ZIP	PENSACOLA, FL 32503
TITLE	V.P.
NAME	CONNIE THOMPSON
STREET ADDRESS	257 AMBER ST.
CITY - ST - ZIP	PENSACOLA, FL 32503
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
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CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-18-03

Date

438-6993

Daytime Phone #

CR2E034B (12/02)

Attachment

THOMPSON CO.
257 AMBER ST.
PENSACOLA, FL 32503
PHONE:800-777-6993
FAX:850-438-6993

06/18/03

RE: THOMPSON CO. (FEI# 59-3397942)

DEAR SIR/MADAM:

ENCLOSE IS A CHECK IN AMOUNT OF \$150.00.

WE NEVER RECEIVED 2003 UNIFORM BUSINESS REPORT FORMS, WE
CALLED PHONE NUMBER 850-488-9000 AND ASKED FOR FORMS AND AGAIN
WE DID NOT RECEIVED ANY FORMS .

WE CALLED AGAIN LAST WEEK AND WE RECEIVED THE FORMS ON JUNE
17TH, 2003.

WE ARE ASKING TO WAIVE ANY LATE FEES AND ANY OTHER
CHARGES REGARDING FILLING UNIFORM BUSINESS REPORT.

THANKS: TAGHY FAKHRAEE, CONTROLLER