

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000090376

1. Entity Name
SANTA FE MANAGEMENT, INC.



Principal Place of Business
11207 NW 12TH PL.
GAINESVILLE, FL 32606

Mailing Address
11207 NW 12TH PL.
GAINESVILLE, FL 32606



DO NOT WRITE IN THIS SPACE

02072005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0802289

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MULLER, CHARLES E II
7385 GALLOWAY RD., STE. 200
MIAMI, FL 33173

**DO NOT WRITE
IN THIS SPACE**

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

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

TITLE PD
NAME THOMPSON, BESSIE K
STREET ADDRESS 1415 FT CLARKE BLVD., APT 129
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE VPD
NAME THOMPSON, LANNIE H JR
STREET ADDRESS 11207 NW 12TH PLACE
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE VPD
NAME THOMPSON, SHIRLEY H
STREET ADDRESS 11207 NW 12TH PLACE
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000337628
04/28/05-80003-012 150.00

**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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lannie H. Thompson
LANNIE H. THOMPSON JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/05 352-332-5823
Date Daytime Phone #