

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2001 8:00 am
Secretary of State

07-19-2001 90006 038 ***550.00

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DOCUMENT # P97000106401

1. Entity Name

THORNHURST MANUFACTURING, INC.

Principal Place of Business

**2720 36TH ST N.
 SUITE 1
 TAMPA FL 33605**

Mailing Address

**2720 36TH ST N.
 SUITE 1
 TAMPA FL 33605**

2. Principal Place of Business

4924 Airport Road
 Suite, Apt. #, etc.

3. Mailing Address

4924 Airport Road
 Suite, Apt. #, etc.

City & State

Zephyrhills Florida

City & State

Zephyrhills Florida

Zip

33540

Country

USA

Zip

33540

Country

USA

4. FEI Number

59-3483178

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**HICKS, HENRY W
 602 SOUTH BOULEVARD
 TAMPA FL 33606**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

SIGNATURE

Signature of person or printed name of registered agent and title of applicant

(If 231E Registered Agent signature required, then not changing)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **MAIER, BRUCE**
 STREET ADDRESS **2720 36TH ST N.**
 CITY-STATE-ZIP **TAMPA FL 33605**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CEO** ☒ Change ☐ Addition
 NAME **Bruce Maier**
 STREET ADDRESS **4924 Airport Road**
 CITY-STATE-ZIP **Zephyrhills, FL 33540**

TITLE ☐ Change ☒ Addition
 NAME **President**
 STREET ADDRESS **Fred Daniels**
 CITY-STATE-ZIP **4924 Airport Rd.
 Zephyrhills, FL 33540**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Bruce Maier
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/01 813-783-7700
 Original Filing #

CR2E034 (5/01)