

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000053866

Entity Name: BRUCE THOMAS, INC.

FILED  
Jan 18, 2008  
Secretary of State

## Current Principal Place of Business:

2919 ALICE DRIVE  
LAKE WORTH, FL 33461

## New Principal Place of Business:

2919 ALICE DRIVE  
PALM SPRINGS, FL 33461 US

## Current Mailing Address:

2919 ALICE DRIVE  
LAKE WORTH, FL 33461

## New Mailing Address:

2919 ALICE DRIVE  
PALM SPRINGS, FL 33461 US

FEI Number: 65-0844431

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, BRUCE  
2919 ALICE DRIVE  
LAKE WORTH, FL 33461 US

## Name and Address of New Registered Agent:

THOMAS, BRUCE  
2919 ALICE DRIVE  
PALM SPRINGS, FL 33461 US

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:

01/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: THOMAS, BRUCE  
Address: 2919 ALICE DRIVE  
City-St-Zip: LAKE WORTH, FL 33461

Title: V ( ) Delete  
Name: THOMAS, KAREN E  
Address: 2919 ALICE DRIVE  
City-St-Zip: LAKE WORTH, FL 33461

Title: T ( ) Delete  
Name: THOMAS, BRUCE  
Address: 2919 ALICE DRIVE  
City-St-Zip: LAKE WORTH, FL 33461

Title: S ( ) Delete  
Name: THOMAS, KAREN E  
Address: 2919 ALICE DRIVE  
City-St-Zip: LAKE WORTH, FL 33461

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: THOMAS, BRUCE  
Address: 2919 ALICE DRIVE  
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: V (X) Change ( ) Addition  
Name: THOMAS, KAREN E  
Address: 2919 ALICE DRIVE  
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: T (X) Change ( ) Addition  
Name: THOMAS, BRUCE  
Address: 2919 ALICE DRIVE  
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: S (X) Change ( ) Addition  
Name: THOMAS, KAREN E  
Address: 2919 ALICE DRIVE  
City-St-Zip: PALM SPRINGS, FL 33461 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE THOMAS

P

01/18/2008

Electronic Signature of Signing Officer or Director

Date