

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000079811**

1. Entity Name
THOMPSON MANUFACTURING, INC.

FILED

02 OCT 24 PM 12:50

Principal Place of Business
**2700 EVANS AVE.
FORT MYERS FL 33901**

Mailing Address
**2700 EVANS AVE.
UNIT 201
FORT MYERS FL 33901**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0863710

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

Name **HARRY G. KITNER**

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

2700 EVANS AVE

City **FT MYERS**

FL

Zip Code **33901**

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 **H.G. KITNER** **PRESIDENT**

(NOTE: Registered Agent signature required when reinstating)

4/30/01

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 \$150.00

After May 1, 2002 Fee will be \$550.00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
THOMPSON, M W
2700 EVANS AVE.
FORT MYERS FL 33901** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVSTDC ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSTD
KITNER, H G
2700 EVANS AVE.
FORT MYERS FL 33901** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVSTDC ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
H.G. KITNER ☐ Delete **10/02/02**

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **H.G. KITNER** **PRES**

4/30/02

941-332-0446

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5447

THOMPSON SALES GROUP INC./PRE-CAST ACCOUNT
Florida Department of State

4/30/2002

150.00

Corporate Annual Report

150.00

SouthTrust Bank C 2002 FILE FEE

THOMPSON MANUFACTURING, INC

2700 EVANS AVENUE
FT. MYERS, FL 33901
941-332-0446 (FAX) 941-332-7132

TRANSMITTAL

DATE: OCTOBER 22, 2002

**TO: STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATION
409 EAST GAINES ST
TALLAHASSEE, FL 32399**

FROM: GLENN KITNER - PRESIDENT

**RE: 2002 UNIFORM BUSINESS REPORT
DOCUMENT #P98000079811**

RECENTLY I RECEIVED A "NOTICE OF ADMINISTRATIVE DISSOLUTION OR REVOCATION". ATTACHED IS A COPY OF THE ORIGINAL REPORT FILED IN APRIL 2002 AND A COPY OF THE CHECK STUB WHICH WAS ATTACHED WITH THE ORIGINAL FILING, AS YOUR REPRESENTATIVE HAD INSTRUCTED ME TO FORWARD TO YOUR OFFICE TODAY. BACK IN JULY OF THIS YEAR, AFTER I RECEIVED A NOTICE FROM YOUR OFFICE THAT YOU HAD NOT RECEIVED OUR APRIL FILING, I SPOKE TO A REPRESENTATIVE IN YOUR OFFICE, AND WAS INFORMED THAT YOU HAD RECEIVED MY CORPORATE CHANGE INFORMATION AND IT WAS NOT NECESSARY TO RE-FILE A REPORT. PLEASE ADVISE WHAT WE NEED TO DO IN ORDER TO RECTIFY THIS SITUATION. THANK YOU.