

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000099425

**FILED**  
**Feb 06, 2012**  
**Secretary of State**

**Entity Name:** THURGALAND MARKETING AND CONSULTING, INC.

**Current Principal Place of Business:**

1651 S. W. 42ND ST.  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

1651 S. W. 42ND ST.  
OCALA, FL 34471

**New Mailing Address:**

**FEI Number:** 59-3552860

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THURGALAND, ROBERT A  
1651 S.W. 42ND ST.  
OCALA, FL 34471 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: THURGALAND, ROBERT A  
Address: 1651 SW 42ND ST  
City-St-Zip: OCALA, FL 34471

Title: VP  
Name: THURGALAND, ROBERT A JR  
Address: 1651 SW 42ND ST  
City-St-Zip: OCALA, FL 34471

Title: S/T  
Name: THURGALAND, JODELL  
Address: 1651 SW 42ND ST  
City-St-Zip: OCALA, FL 34471

I hereby 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 all other like empowered.

SIGNATURE: ROBERT A. THURGALAAND

PRES

02/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date