

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90072 044 ***150.00

DOCUMENT # P99000006483

1. Entity Name

THOMPSON & THOMPSON FINANCIAL, INC.

Principal Place of Business

5374 OSPREY STREET
COCONUT CREEK FL 33073

Mailing Address

5374 OSPREY STREET
COCONUT CREEK FL 33073

2. Principal Place of Business

4840 N. STATE Road # 7

Suite, Apt. #, etc.

205

City & State

COCONUT CREEK FL

Zip

33073

Country

US

3. Mailing Address

4840 N. STATE Road 7

Suite, Apt. #, etc.

205

City & State

COCONUT CREEK FL

Zip

33073

Country

US

6. Name and Address of Current Registered Agent

WEINBERG, STEVEN A
8000 PETERS ROAD
PLANTATION FL 33324

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: Shelly M Thompson

(NOTE: Registered Agent signature required when reinstating)

DATE

1-30-01

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, 2001 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

TITLE	D	☒ Delete
NAME	THOMPSON, RICHARD L	
STREET ADDRESS	5374 OSPREY STREET	
CITY-ST-ZIP	COCONUT CREEK FL 33073	
TITLE	D	☐ Delete
NAME	THOMPSON, SHELLY M	
STREET ADDRESS	5374 OSPREY STREET	
CITY-ST-ZIP	COCONUT CREEK FL 33073	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME	4840 N STATE Road 7 Apt #205	
STREET ADDRESS	COCONUT CREEK, FL 33073	
CITY-ST-ZIP		
TITLE	P.S.	☒ Change ☐ Addition
NAME	4840 N. STATE Road 7 Apt 205	
STREET ADDRESS	COCONUT CREEK, FL 33073	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Shelly M Thompson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-30-01

CR2E034 (10/00)

710207



DO NOT WRITE IN THIS SPACE