## 2007 FOR PROFIT CORPORATION L ANNUAL REPORT **DOCUMENT # P99000012124** 1. Entity Name THOMAS CONSTRUCTION CO. OF MARATHON, INC. Principal Place of Business Mailing Address 931 GARDENIA DR. 931 GARDENIA DR #468 # 468 DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483 01042007 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent WIECEK, THOMAS E 931 GARDENIA DR. #468

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if

with altrother like empowered.

changed, or on an attachment with an address

**SIGNATURE:** 

**FILED** Apr 04, 2007 08:00 All Secretary of State



No Chg-P

CR2E034 (11/05)

	NO NOT WOITE II	N THIS SDAA	^E					
DO NOT WRITE IN THIS SPA				4. FEI Numb			Applied For	
				65-089	4398		Not Applicable	
				5. Certificate	of Status Desired	_m \$8.	75 Additional	
	• N	-44-	<del> </del>		· · · · · · · · ·	Fee	Required	
	6. Name and Address of Current Regis	stered Agent						
WIECEK, THOMAS E				DO	NOT W	DITE		
931 GARDENIA DR. #468				DO NOT WRITE				
DELRAY BEACH, FL 33483			IN THIS SPACE					
•				114	11113 31.	TOL		
	named entity submits this statement for the tions of registered agent.	purpose of changing its registere	ed office or re	egistered agent, or bo	th, in the State of Flor	ida. I am famil	iar with, and accept	
SIGNATURE.		•						
	Signature, typed or printed name of registered agent and title	of applicable. (NOTE: Registered	d Agent signature	required when reinstating)	* *	DATE	,	
•		Election Campaign Finan	e in a				• • •	
	E NOWIII FEE IS \$150.00 by 1, 2007 Fee will be \$550.00	Trust Fund Contribution.		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIRE	CTORS						
TITLE	P				Langen	~~~~~		
NAME	WIECEK, THOMAS E				000000	690767	ነው ያጠው ግጠ	
STREET ADDRESS CITY-ST-ZIP	,			04/12/07-80003-002 158.75				
	DELRAY BEACH, FL 33483		1					
TITLE NAMÉ	WIECEK, CAROLE L							
STREET ADDRESS								
CITY-ST-ZIP	DELRAY BEACH, FL 33483							
TITLE			1			•		
NAME								
STREET ADDRESS				DO	NOT W	DITE		
CITY-ST-ZIP				DO	NOT W	KIIC		
TITLE	'			IN .	THIS SP	ACE		
NAME				11.4	11110 01	AOL		
STREET ADDRESS	•	,						
CITY-ST-ZIP								
TITLE	'							
NAME ATTENT ADDRESS	l .							
STREET ADDRESS CITY-ST-ZIP	· · · · ·	1	1					
			ł					
TITLE		, ,	, <b></b>		, ,			
STREET ADDRESS			ı	, , ,				
OTHER TEN		• .		2.7 SB 12.1 4				