2000 UNIFORM BUSINESS REPORT (UBR)

May 15, 2000 8:00 am Secretary of State DOCUMENT # **P99000033286** GEORGE E. THOMPSON DEVELOPMENTS, INC. 05-15-2000 90248 010 ***158.75 Mailing Address Principal Place of Business 331 SOUTH 12TH ST. 331 SOUTH 12TH ST. FERNANDINA BEACH FL 32034-3420 Fernandina Beach FL 32034 3. Mailing Address 2. Principal Place of Business 12th Street <u>331 s.</u> <u> 12th Street</u> 331 S. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Not Applicable Fernandina Bch., FL Fernandina Bch., FL 59-3593056 Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 32034 32034 $U_{-}S$ s.a7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SIMMONS, EVETT L Street Address (P.O. Box Number is Not Acceptable) 145 N.W. CENTRAL PARK PLAZA STE. 200 PORT ST. LUCIE FL 34986 Zin Code City FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE TITLE ☐ Delete THOMPSON, GEORGE E NAME NAME STREET ADDRESS 331 SOUTH 12TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FERNANDINA BEACH FL 32034 ☐ Change ☐ Addition TITLE ☐ Delete TITLE THOMPSON, MARY E NAME NAME STREET ADDRESS STREET ADDRESS 331 SOUTH 12TH ST. CITY ST-7IP CITY-ST-ZIP FERNANDINA BEACH FL 32034 ☐ Addition Change ☐ Delete TITLE TITLE MORRIS, PAULA E NAME NAME 1204 FIR STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FERNANDINA BEACH FL 32034 ☐ Addition ☐ Change TITL F ☐ Delete TITLE MITCHELL, VELMA D NAME NAME STREET ADDRESS STREET ADDRESS PO BOX 373 CITY-ST-ZIP CITY-ST-ZIP FERNANDINA BEACH FL 32035-0373 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 attachaper with an address, with all other like empowered.

COTOC E THOMOSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: .

FILED

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