


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State


04-19-2004 90241 003 ***150.00

DOCUMENT # F01000001229 1. Entity Name THERMON INDUSTRIES, INC.	
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Principal Place of Business 100 THERMON DRIVE SAN MARCOS, TX 78666	Mailing Address P.O. BOX 609 SAN MARCOS, TX 78666
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DO NOT WRITE IN THIS SPACE

01000010



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number 17-4224679	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	BURDICK, RICHARD L
STREET ADDRESS	1030 BELVIN STREET
CITY-ST-ZIP	SAN MARCOS, TX 78666
TITLE	VD
NAME	BURDICK, MARK
STREET ADDRESS	220 PAMPAS PASS
CITY-ST-ZIP	SAN MARCOS, TX 78666
TITLE	STD
NAME	SCHULTE, FRED
STREET ADDRESS	11029 BALLYBUNION PLACE
CITY-ST-ZIP	AUSTIN, TX 78747
TITLE	D
NAME	BAYLESS, CHARLES E
STREET ADDRESS	7300 NORTH SUNSET CANYON DRIVE
CITY-ST-ZIP	TUCSON, AZ 85718
TITLE	D
NAME	COX, GLENN
STREET ADDRESS	2306 STONEWALL DRIVE
CITY-ST-ZIP	BARTLESVILLE, OK 74006
TITLE	D
NAME	ROBERTS, ROY
STREET ADDRESS	317 PINE RIDGE DRIVE
CITY-ST-ZIP	BLOOMFIELD HILLS, MI 48304

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12. 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 10 or Block 11 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE:  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date: 1-8-04 Daytime Phone #: (512) 396-5801