

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 524147

FILED
Jan 21, 2005
Secretary of State

Entity Name: THERM-O-TYPE CORPORATION

Current Principal Place of Business:

509 CHURCH ST.
P O BOX 998 (342740998)
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

509 CHURCH ST.
P O BOX 998 (342740998)
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 59-1815174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN PELT, E E, SR
2506 NORTHWAY DR VENICE 33595 BX 998
NOKOMIS, FL 33555 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: VAN PELT, CHRISTOPHE, R K
Address: 405 MURILLO DR.
City-St-Zip: NOKOMIS, FL

Title: V () Delete
Name: VAN PELT, MARTIN J,
Address: 574 GARDEN RD
City-St-Zip: VENICE, FL

Title: PD () Delete
Name: VAN PELT, E E SR,
Address: 2506 NORTHWAY DR.
City-St-Zip: VENICE, FL

Title: VP () Delete
Name: VAN PELT, E E JR,
Address: 4017 BLACKTAIL ROAD
City-St-Zip: COCOLALLA, ID

Title: T () Delete
Name: COOK, NANETTE VP,
Address: 491 CONRAD
City-St-Zip: VENICE, FL

Title: VDS () Delete
Name: VAN PELT, JOYCE,
Address: 2506 NORTHWAY DR
City-St-Zip: VENICE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: E.E. VAN PELT, SR.

PD

01/21/2005

Electronic Signature of Signing Officer or Director

Date