## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 524147** 

Entity Name: THERM-O-TYPE CORPORATION

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
509 CHURCH ST. P O BOX 998 (342740998) NOKOMIS, FL 34275			509 CHURCH ST. NOKOMIS, FL 34275		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
509 CHURCH ST. P O BOX 998 (342740998) NOKOMIS, FL 34275			509 CHURCH ST. NOKOMIS, FL 34275		
FEI Number:	59-1815174	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
VAN PELT, E E, SR 2506 NORTHWAY DR VENICE 33595 BX 998 NOKOMIS, FL 33555 US			VAN PELT, E E, SR 2506 NORTHWAY DF NOKOMIS, FL 33555		
	named entity of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				01/16/2009	
	Electro	nic Signature of Registered Age	nt	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	,	) Delete RISTOPHE, R K DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( VAN PELT, MA 574 GARDEN VENICE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD ( VAN PELT, E E 2506 NORTHV VENICE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( VAN PELT, E E 4017 BLACKT, COCOLALLA,	EJR, AIL ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( COOK, NANET 491 CONRAD VENICE, FL	) Delete TE VP,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VDS ( VAN PELT, JO 2506 NORTHV		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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. PRES 01/16/2009