

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001643

FILED
Jan 07, 2005
Secretary of State

Entity Name: TIC-THE INDUSTRIAL COMPANY WYOMING, INC.

Current Principal Place of Business:

1474 WILLER DRIVE
CASPER, WY 82604

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3800
CASPER, WY 82602

New Mailing Address:

FEI Number: 83-0240886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PD () Delete
Name: MEADOR, RUDOLPH L
Address: 2210 MIRACLE DRIVE
City-St-Zip: CASPER, WY 82602

Title: VD () Delete
Name: MCKENZIE, RONALD W
Address: P.O. BOX 774848
City-St-Zip: STEAMBOAT SPRINGS, CO 80477

Title: VD () Delete
Name: BRUST, DONALD S
Address: 7739 WEST CHALK CREEK ROAD
City-St-Zip: CASPER, WY 82604

Title: VSTD () Delete
Name: BIGGS, ANN S
Address: 1300 MIRACLE DR
City-St-Zip: CASPER, WY 82609

Title: V () Delete
Name: KISSANE, JAMES F
Address: 1385 TIMOTHY
City-St-Zip: STEAMBOAT SPRINGS, CO 80488

Title: V (X) Delete
Name: STETTNER, PAUL
Address: 520 ANGLERS DRIVE
City-St-Zip: STEAMBOAT SPRINGS, CO 80477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MEADOR, RUDOLPH L
Address: 2210 MIRACLE DRIVE
City-St-Zip: CASPER, WY 82609

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

Title: () Change () Addition
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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: ANN BIGGS

VDST

01/07/2005

Electronic Signature of Signing Officer or Director

Date