

**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.



Principal Place of Business
**100 THERMON DRIVE
SAN MARCOS, TX 78666**

Mailing Address
**P.O. BOX 609
SAN MARCOS, TX 78666**

DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number
17-4224679

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$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**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCD
BURDICK, RICHARD L
1030 BELVIN STREET
SAN MARCOS, TX 78666**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
BURDICK, MARK
220 PAMPAS PASS
SAN MARCOS, TX 78666**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
SCHULTE, FRED
11029 BALLYBUNION PLACE
AUSTIN, TX 78747**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BAYLESS, CHARLES E
7300 NORTH SUNSET CANYON DRIVE
TUCSON, AZ 85718**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
COX, GLENN
2306 STONEWALL DRIVE
BARTLESVILLE, OK 74006**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROBERTS, ROY
317 PINE RIDGE DRIVE
BLOOMFIELD HILLS, MI 48304**

**DO NOT WRITE
IN THIS SPACE**

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

1-8-04

Date

(512) 396-5801

Daytime Phone #