

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003431

FILED
Jan 05, 2009
Secretary of State

Entity Name: AUTOMATIC ICE SYSTEMS INC.

Current Principal Place of Business:

12976 MAURER INDUSTRIAL DR
ST. LOUIS, MO 63127

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 29196
ST. LOUIS, MO 63126

New Mailing Address:

12976 MAURER INDUSTRIAL DR
ST. LOUIS, MO 63127

FEI Number: 43-1183785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD, STE 101
TALLAHASSEE, FL 323012960 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: P () Delete
Name: CARPENTER, DONALD W
Address: 2431 SMIZER MILL EST. DR.
City-St-Zip: FENTON, MO 63026

Title: V () Delete
Name: CARPENTER, DOUGLAS W
Address: 502 N. BOMPART
City-St-Zip: WEBSTER GROVES, MO 63119

Title: S () Delete
Name: CARPENTER, JULIE
Address: 2431 SMIZER MILL EST. DR.
City-St-Zip: FENTON, MO 63026

Title: T () Delete
Name: CARPENTER, CHARLES D
Address: 9589 DUNKIRK DR.
City-St-Zip: FT. MEYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARPENTER, DONALD W
Address: 9801 HILLTOP DRIVE
City-St-Zip: ST. LOUIS, MO 63128

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

Title: S (X) Change () Addition
Name: CARPENTER, JULIE
Address: 9801 HILLTOP DRIVE
City-St-Zip: ST. LOUIS, MO 63128

Title: T (X) Change () Addition
Name: CARPENTER, CHARLES D
Address: 33 CHRYSANTHEMUM DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

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: DONALD CARPENTER

P

01/05/2009

Electronic Signature of Signing Officer or Director

Date