2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F95000001516

1. Entity Name

THERMAL ENGINEERING CONSTRUCTION SERVICES



Principal Place of Business

550B BROOKSHIRE ROAD GREER, SC 29651 US

Mailing Address

550B BROOKSHIRE ROAD GREER, SC 29651 US

FILED Jul 17, 2006 8:00 am Secretary of State

07-17-2006 90139 037 ***150.00

DO NOT WRITE IN THIS SPACE

07102006 No

No Chg-P

CR2E034 (11/05)

4. FEI Number 57-1016262

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 Due by September 6, 2006 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

OFFICERS AND DIRECTORS 10. TITLE NAUGHTON, DALE NAME 550 B BROOKSHIRE ROAD STREET ADORESS CITY-ST-ZIP GREER, SC 29651 S TITLE NAME ZWOŁAK, JOHN STREET ADDRESS 550B BROOKSHIRE ROAD CITY-ST-ZIP GREER, SC 29651 TITLE LEEMAN, SCOTT NAME STREET ADDRESS 550B BROOKSHIRE ROAD CITY-ST-7IP GREER, SC 29651 TITLE BRANTL, JAMES STREET ADORESS **5 NEPONSET STREET** CITY-ST-ZIP WORCESTER, MA 01606 TITS E BRARDANO, ANTHONY A NAME 82 CAMBRIDGE STREET STREET ADDRESS CITY-ST-ZIP **BURLINGTON, MA 01803** NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DALE NAVEHTON

7-10-0

Daytime Phone #