



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90571 017 ***158.75

DOCUMENT # F96000000492					
1. Entity Name GENERAL REFRIGERMETICS CORPORATION					
Principal Place of Business 19-35 HAZEN ST E ELMHURST, NY 11370			Mailing Address PO BOX 1592-36NE YORK, PA 17405		
2. Principal Place of Business		3. Mailing Address PO Box 1592-364E			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 11-2382432	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
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. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPELLAR, PETER 2075 ROSEWOOD LANE YORK, PA 17403		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAMPBELL, IAN A 1740 WYNDHAM DRIVE SOUTH YORK, PA 17403		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CORCORAN, JAMES.P 317 W. TIMONIUM RD LUTHERVILLE TIMONIUM, MD 21093		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Timonium, MD	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAVIS, JUNE G 915 UPLAND RD YORK, PA 17403		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Jane G. Davis	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DYER, GILFORD 1100 WETHERBURN DR. YORK, PA 17404		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BLUMHAND, CHRISTOPHER W 2664 CHADBOURNE DR YORK, PA 17404		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition AT ALLEN R. WEAVER 509 Orchard Rd Lemoyne, PA 17043	
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:  ALLEN R. WEAVER 4/8/04 717-771-6282					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

11-2382432

Attachment
24655534
#F960000000

NAME

PETER SPELLAR
IAN A. CAMPBELL
JAMES P. CORCORAN
JANE G. DAVIS
GILFORD M. DYER
ALLEN R. WEAVER

PRESIDENT
VICE PRESIDENT
TREASURER
VICE PRESIDENT, SECRETARY
ASSISTANT SECRETARY
ASST. SECY. & ASST. TREASURER

2075 ROSEWOOD LANE
1740 WYNDHAM DRIVE SOUTH
317 W. TIMONIUM ROAD
915 UPLAND ROAD
1100 WETHERBURN DRIVE
509 ORCHARD DRIVE

YORK, PA 17403	167-60-6623
YORK, PA 17403	192-74-3976
TIMONIUUM, MD 21093	324-38-7653
YORK, PA 17403	109-42-8098
YORK, PA 17404	233-76-3515
LEMOYNE, PA 17043	171-42-9221

167-60-6623
192-74-3976
324-38-7653
109-42-8098
233-76-3515
171-42-9221