2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2004
Secretary of State

DOCUMENT# P03000015667

Entity Name: DELTA-T REFRIGERATION, INC.

Current Principal Place of Business:

617 BROOKFIELD PLACE
APOPKA, FL 32712

New Principal Place of Business:

Current Mailing Address:

617 BROOKFIELD PLACE
APOPKA, FL 32712

New Mailing Address:

FEI Number: 65-1172510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLEVENGER, MARK
617 BROOKFIELD PLACE
APOPKA, FL FL

Name and Address of New Registered Agent:

CLEVENGER, MARK E PRESIDE
617 BROOKFIELD PLACE
APOPKA, FL FL

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: MARK E. CLEVENGER 03/14/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CLEVENGER, MARK
Address: 617 BROOKFIELD PLACE
City-St-Zip: APOPKA, FL 32712

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition
Name: CLEVENGER, LUCILLE A
Address: 617 BROOKFIELD PLACE
City-St-Zip: APOPKA, FL 32712

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: MARK E. CLEVENGER P 03/14/2004
Electronic Signature of Signing Officer or Director Date