## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000127600

Entity Name: TALLAHASSEE AUTO COOL. INC

FILED May 14, 2005 Secretary of State

Littly Nan	HE. TALLAHA	SSEE AUTO COOL, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
3048-A W. THARPE STREET TALLAHASSEE, FL 32303				3048 W. THARPE STREET SUITE A TALLAHASSEE, FL 32303		
Current Mailing Address:				New Mailing Address:		
3048-A W. THARPE STREET TALLAHASSEE, FL 32303				3048 W. THARPE STREET SUITE A TALLAHASSEE, FL 32303		
FEI Number:	27-0070270	FEI Number Applied For ( )	FEI Number Not Ap	plicable ( )	Certificate of Status Desired	( )
Name and	Address of C	urrent Registered Agent:	Name an	d Address of	New Registered Agent:	
	LEGE AVE 0 SSEE, FL 3230 named entity s	of US ubmits this statement for the p	ourpose of changing	ı its registered	office or registered agent, o	r both,
SIGNATUR						
		ic Signature of Registered Ag	ent		Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () FRYAR, JOSEP 3517 DUNDALK TALLAHASSEE,	DR	Title: Name: Address: City-St-Zip:	FRYAR, JOS 3517 DUNDA		
Title: Name: Address: City-St-Zip:	D () FRYAR, AMYLY 3517 DUNDALK TALLAHASSEE,	DR	Title: Name: Address: City-St-Zip:	FRYAR, AMY 3517 DUNDA		
Title: Name: Address: City-St-Zip:	D () WALKER, DALE 729 E BREVARI TALLAHASSEE,	O ST	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () HARRINGTON, I 2058 DELLWOO TALLAHASSEE,	DD DR	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	

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: AMYLYNN FRYAR SEC 05/14/2005