

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000054374

FILED
Jan 08, 2009
Secretary of State

Entity Name: ERGO COMFORT SOLUTIONS, INC.

Current Principal Place of Business:

1844 W. FAIRBANKS AVE.
204
WINTER PARK, FL 32789 US

Current Mailing Address:

1844 W. FAIRBANKS AVE.
204
WINTER PARK, FL 32789 US

New Principal Place of Business:

1844 W. FAIRBANKS AVE.
202
WINTER PARK, FL 32789 US

New Mailing Address:

1844 W. FAIRBANKS AVE.
202
WINTER PARK, FL 32789 US

FEI Number: 26-3708816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEPAULIS, DON
1844 W. FAIRBANKS AVE.
204
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

DEPAULIS, DON
1844 W. FAIRBANKS AVE.
202
WINTER PARK, FL 32789 US

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:

01/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, S () Delete
Name: PAPPADAKIS, DAN
Address: 1844 W. FAIRBANKS AVE., #204
City-St-Zip: WINTER PARK, FL 32789 US

Title: T, D (X) Delete
Name: PAPPADAKIS, DAN
Address: 1844 W. FAIRBANKS AVE., #204
City-St-Zip: WINTER PARK, FL 32789 US

Title: D (X) Delete
Name: DEPAULIS, DON
Address: 1844 W. FAIRBANKS AVE. #204
City-St-Zip: WINTER PARK, FL 32789 US

Title: D (X) Delete
Name: MIKHNO, VITALY
Address: 1844 W. FAIRBANKS AVE., #204
City-St-Zip: WINTER PARK, FL 32789 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: DEPAULIS, DON
Address: 1844 W. FAIRBANKS AVE., #204
City-St-Zip: WINTER PARK, FL 32789 US

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

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

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

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: DON DEPAULIS

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date