2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# P29700

Entity Name: CHATTANOOGA BOILER & TANK COMPANY

Current Principal Place of Business:

1011 EAST MAIN STREET
CHATTANOOGA, TN 37408

New Principal Place of Business:

Current Mailing Address:

PO BOX 110
CHATTANOOGA, TN 37401 US

New Mailing Address:

FEI Number: 62-1327770 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: ALBRIGHT, JOHN M
Address: 1902 WOODS VIEW CT
City-St-Zip: HIXSON, TN 37343

Title: D ( ) Delete
Name: WILLIAMS, DALE,
Address: 110 CONCORD RD
City-St-Zip: SMYRNA, GA

Title: D ( ) Delete
Name: TORCHIO, PHIL
Address: 1285 HAWTHORNE AVE
City-St-Zip: SMYRNA, GA 30080

Title: D ( ) Delete
Name: WILLIAMS, FRANK E.,, JR.
Address: 1285 HAWTHORNE AVE., SE
City-St-Zip: SMYRNA, GA

Title: S/D ( ) Delete
Name: BRYAN, SHARON A
Address: 9215 HIDDEN MOUTAIN DR
City-St-Zip: CHATTANOOGA, TN 37421

Title: D (X) Delete
Name: JOHN, ALBRIGHT A
Address: 1011 EAST MAIN STREET
City-St-Zip: CHATTANOOGA, TN 37408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change ( ) Addition
Name: TORCHIO, PHIL
Address: 1285 HAWTHORNE AVE
City-St-Zip: SMYRNA, GA 30080

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: SHARON A BRYAN CFO 01/19/2009

Electronic Signature of Signing Officer or Director Date