


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000060191 1. Entity Name THERMOCON, INC.	
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Principal Place of Business 900 BIG TREE ROAD SOUTH DAYTONA, FL 32119	Mailing Address 900 BIG TREE ROAD SOUTH DAYTONA, FL 32119
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DO NOT WRITE IN THIS SPACE



02142005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3333800	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DAVIS, EDWIN D II
900 BIG TREE ROAD
SOUTH DAYTONA, FL 32119**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000246573 02/28/05-80071-008 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, EDWIN D 900 BIG TREE RD SOUTH DAYTONA, FL 32119
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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: *Edwin D. Davis* **2-24-05** **(386) 788-7077**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

EDWIN D. DAVIS, PRES.