

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000039026

Entity Name: COLD BAG, INC.

FILED  
Apr 08, 2006  
Secretary of State

**Current Principal Place of Business:**

2025 N. DOVER RD.  
DOVER, FL 33527 US

**New Principal Place of Business:**

**Current Mailing Address:**  
PO BOX 7628  
OXNARD, CA 93031

**New Mailing Address:**

FEI Number: 59-3444016      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SPERRY, BRUCE J  
1003 S. ALEXANDER ST., STE. 1  
PLANT CITY, FL 33566 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 (X).**

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: BORCHARD, JOHN G  
Address: 2025 N. DOVER ROAD  
City-St-Zip: DOVER, FL 33527 US

Title: PTD ( ) Delete  
Name: BORCHARD, JAMES A  
Address: 1600 BEACON PLACE  
City-St-Zip: OXNARD, CA 93033

Title: D ( ) Delete  
Name: GRESSER, JACK  
Address: 521 E. MAIN ST  
City-St-Zip: SANTA MARIA, CA 93454

Title: D ( ) Delete  
Name: DOUD, DERRICK  
Address: 1284 W. MAIN STREET  
City-St-Zip: SANTA MARIA, CA 93454

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: PTD (X) Change ( ) Addition  
Name: BORCHARD, JAMES A  
Address: 1601 EMERSON AVE.  
City-St-Zip: OXNARD, CA 93033

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: JAMES BORCHARD

PTD

04/08/2006

Electronic Signature of Signing Officer or Director

Date