## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT-#-S93737

1. Entity Name FROST ENERGY COMPANY



FILED Jan 16, 2008 08:00 Al Secretary of State

Principal Place of Business

721 BINNACLE POINT DR. LONGBOAT KEY, FL 34228 Mailing Address

721 BINNACLE POINT DR. LONGBOAT KEY, FL 34228



DO NOT WRITE IN THIS SPACE

01132008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FROST, WELDON G 721 BINNACLE POINT DR. LONGBOAT KEY, FL 34228

## 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 Signature, typed or printed name of registered agent and title I applicable. (NOTE: Registered in			Agent signature rec	gent signature required when reinstating) DATE		
FiLE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financ Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000785653 01/17/08-80003-003	150.00
10.	OFFICERS AND DIREC	TORS				•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FROST, BRENDA T 721 BINNACLE POINT DR. LONGBOAT KEY, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FROST, BRENDA T 721 BINNACLE POINT DR. LONGBOAT KEY, FL		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT FROST, WELDON G 721 BINNACLE PT. DR. LONGBOAT KEY, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FROST, TERRENCE W 4691 EAST WEAVER PLACE CENTENNIAL, CO 80121					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FROST, JAMES T 1010 HORTON ST NEW SMYRNA BEACH, FL 32169				·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information						

2.1 Thereby certify that the information supplies with its filling does not qualify for the exemptions contained in Chapter 118, it forms discussed indicated on this report or suppliemental 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:

BIGNATURE AND TYPED OF SHINTED THAME OF SIGNING OFFICES OR DIRECTOR

4 January 2008 941 383 -890