

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S97871**

1. Corporation Name

THERMALTECH ENGINEERED PRODUCTS, INC.

Principal Place of Business

**950 GENOA CT
PUNTA GORDA FL 33950**

Mailing Address

**950 GENOA CT
PUNTA GORDA FL 33950**

FILED
Jul 20, 1999 8:00 am
Secretary of State

07-20-1999 90010 001 ***550.00

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1991

2. Principal Place of Business

21 110 S. ARMENIA

2a. Mailing Address

26 110 S. ARMENIA

4. FEI Number

65-0397477

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 TAMPA FL

City & State

28 TAMPA FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

24 33609

25 USA

Zip

Country

29 33609

30 USA

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WICKS, GERALD W.

**950 GENOA CT
PUNTA GORDA FL 33950**

81. Name

WICKS, GERALD W.

82. Street Address (P.O. Box Number is Not Acceptable)

110 S. ARMENIA AVE

83.

TAMPA FL

84. City

FL

85. Zip Code
33609

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE **Gerald W. Wicks**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME **GERALD W. WICKS**

STREET ADDRESS **950 GENOA CT.**

CITY-ST-ZIP **PUNTA GORDA FL**

1.1 TITLE

P ☒ Change ☐ Addition

1.2 NAME

GERALD W WICKS

1.3 STREET ADDRESS

110 S. ARMENIA AVE

1.4 CITY-ST-ZIP

TAMPA FL 33609

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

VP JULIE FERGUSON ☐ Change ☒ Addition

2.2 NAME

110 S. ARMENIA AVE

2.3 STREET ADDRESS

TAMPA FL 33609

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Gerald W. Wicks**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 9, 1999 (813) 258-6609

CR2E034 (5/99)

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