

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J48200

FILED
Mar 20, 2009
Secretary of State

Entity Name: BI-COUNTY HEATING & AIR CONDITIONING, INC.

Current Principal Place of Business:

3822 LAND O LAKE BLVD.
LAND O LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 356
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 59-2753279 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TIPTON, BILLY G.
22104 LAVER LANE
LAND O LAKES, FL 34639 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: DP () Delete
Name: TIPTON, BILLY G
Address: 22104 LAVER LN
City-St-Zip: LAND O LAKES, FL 34639

Title: D () Delete
Name: TIPTON, KATHY
Address: 22104 LAVER LN
City-St-Zip: LAND O LAKES, FL 34639

Title: D () Delete
Name: TIPTON, BRIAN
Address: 22104 LAVER LN
City-St-Zip: LAND O LAKES, FL 34639

Title: D () Delete
Name: TIPTON, MARK
Address: 22104 LAVER LN
City-St-Zip: LAND O LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KATHY TIPTON

D

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date