

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M98561

FILED
Feb 02, 2005
Secretary of State

Entity Name: CLIMATE MASTERS HEATING & AIR CONDITIONING, INC.

Current Principal Place of Business:

5275 B US1 SOUTH
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

5275 B US1 SOUTH
ST. AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 59-2905342 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHULER, GREGORY M.
1078 CHEYENNE DR
ST. AUGUSTINE, FL 32086 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: PTD () Delete
Name: SCHULER, GREGORY M.,
Address: 1078 CHEYENNE DR.
City-St-Zip: ST. AUGUSTINE, FL

Title: VPD () Delete
Name: SCHULER, DEBBIE
Address: 1078 CHEYENNE DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: TD () Delete
Name: BAILEY, KELLY M
Address: 103 SAN JOSE BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: OD () Delete
Name: TICE, ELEANOR L
Address: 524 GERONA ROAD
City-St-Zip: SAINT AUGUSTINE, FL 32086

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 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 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: KELLY M. BAILEY

TD

02/02/2005

Electronic Signature of Signing Officer or Director

_____ Date