


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000094646
 1. Entity Name
 BEHRENS HEATING & AIR CONDITIONING, INC.



Principal Place of Business 2025 MAGNOLIA AVE. SOUTH DAYTONA, FL 32119 US	Mailing Address 2025 MAGNOLIA DR. SOUTH DAYTONA, FL 32119 US
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DO NOT WRITE IN THIS SPACE



03152005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3361624	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BEHRENS, KEVIN H
 2025 MAGNOLIA AVE.
 SOUTH DAYTONA, FL 32119

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

400000269863
 03/19/05-80028-009 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEHRENS, KEVIN H 2025 MAGNOLIA AVE, SOUTH DAYTONA, FL
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12. 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 report or supplemental 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: Kevin Behrens Kevin Behrens 3-16/05 3867617751
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #