

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 190630

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: WESTBROOK AIR CONDITIONING & PLUMBING INC.

**Current Principal Place of Business:**

1411 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32855

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 555459  
ORLANDO, FL 32855

**New Mailing Address:**

FEI Number: 59-0761330      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PETERLIN, CYNTHIA  
1411 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805    US

**Name and Address of New Registered Agent:**

PETERLIN, CYNTHIA C  
1411 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805    US

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: CYNTHIA C. PETERLIN      04/21/2004  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DCEO ( ) Delete  
Name: MATTHEWS, OWEN  
Address: 2034 COVE TRAIL  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: FABER, CRAIG  
Address: 17 S. WESTMORELAND DR.  
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete  
Name: THURMAN, DAVID J  
Address: 114 WATER OAK LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D ( ) Delete  
Name: GLANCY, DANIEL  
Address: 210 NE TRIPLET DR  
City-St-Zip: CASSELBERRY, FL 32707

Title: DP ( ) Delete  
Name: ROBERTS, JAMES  
Address: 1748 COLEEN DRIVE  
City-St-Zip: ORLANDO, FL 32809

Title: T ( ) Delete  
Name: KEILING, KENTON S  
Address: 1918 KIMBERWICKE CIRCLE  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: FABER, CRAIG  
Address: 17 S. WESTMORELAND DR.  
City-St-Zip: ORLANDO, FL 32805

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

Title: D (X) Change ( ) Addition  
Name: GLANCY, DANIEL  
Address: 210 NE TRIPLET DR  
City-St-Zip: CASSELBERRY, FL 32707

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: CYNTHIA C PETERLIN      S      04/21/2004  
Electronic Signature of Signing Officer or Director      Date

CYNTHIA C PETERLIN, SECRETARY  
1411 S. ORANGE BLOSSOM TRAIL  
ORLAND FL 32855

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