


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # 335853</b> 1. Entity Name <b>AIR CONDITIONING WARRANTY CORP</b>	
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Principal Place of Business <b>37 NE 1ST TERRACE SUITE D DEERFIELD BEACH, FL 33441 US</b>	Mailing Address <b>37 NE 1ST TERRACE SUITE D DEERFIELD BEACH, FL 33441 US</b>
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01042007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-1221864</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
  
**WILLIAMS-HURLEY, BARBARA  
180 N.W. 47TH AVE  
DEERFIELD BEACH, FL 33442**

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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAMS-HURLEY, BARBARA 180 NW 47TH AVENUE DEERFIELD BCH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAWSON, STEPHEN M 115 ST CLOUD LANE BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HURLEY, BARBARA W 180 NW 47 AVE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HURLEY, JERIMIAH 180 NW. 47TH AVE. DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, RICHARD C 2291 LITTLE BROOKE LANE DUNWOODY, GA 30338
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, MARY ANN 2291 LITTLE BROOKE LANE DUNWOODY, GA 30338

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IN THIS SPACE**

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04/24/07-80010-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** Barbara W. Hurley **4-10-07 954-427-1200**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #