

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 515990

FILED
Mar 12, 2009
Secretary of State

Entity Name: PORT ORANGE AIR CONDITIONING & HEATING, INC

Current Principal Place of Business:

515C HERBERT STREET
PORT ORANGE, FL 32119 US

New Principal Place of Business:

515 HERBERT STREET - STE C
PORT ORANGE, FL 32129 US

Current Mailing Address:

515C HERBERT ST
PORT ORANGE, FL 32119 US

New Mailing Address:

515 HERBERT STREET - STE C
PORT ORANGE, FL 32129 US

FEI Number: 59-1697007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROUP, ROBERT G.
4343-A RIDGEWOOD AVE
PORT ORANGE, FL 32127 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: P () Delete
Name: KEANE, ANTHONY P.
Address: 615 POWERS AVE
City-St-Zip: PORT ORANGE, FL

Title: V () Delete
Name: KEANE, MICHAEL A
Address: 120 TAGANANA
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: ST () Delete
Name: KEANE, ROCHELLE J.
Address: 615 POWERS AVE.
City-St-Zip: PORT ORANGE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KEANE, ANTHONY P
Address: 615 POWERS AVE
City-St-Zip: PORT ORANGE, FL

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

Title: ST (X) Change () Addition
Name: KEANE, ROCHELLE J
Address: 615 POWERS AVE.
City-St-Zip: PORT ORANGE, FL

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: ANTHONY P. KEANE

P

03/12/2009

Electronic Signature of Signing Officer or Director

_____ Date