2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F27740

FILED Feb 03, 2009 Secretary of State

Entity Name: WEATHER CONTROL AIR CONDITIONING, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	ER ROAD			
UITE A	ERS, FL 33907	'US		
	,			
urrent Mailing Address:		New Mailing Address:		
O. BOX T MYERS	60064 S, FL 33906	US		
El Number	: 65-0080106	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
)20 TIGÉ	WILLIAM S. R PALM WAY ERS, FL 33966	S US		
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ne above	·	ubmits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
ne above the State	named entity s e of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
e above the State	named entity s e of Florida. RE:	submits this statement for the particles in the particles of Signature of Registered Agr		ed office or registered agent, or both, Date
ne above the State GNATUI	named entity see of Florida. RE: Electron			
ne above the State GNATUI	named entity see of Florida. RE: Electron	ic Signature of Registered Agon Trust Fund Contribution ().	ent	
ne above the State GNATUI	named entity see of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Ago Trust Fund Contribution (). TORS: Delete JAM, LM WAY	ent	Date
e above the State GNATUE ction Car FFICER: e: me: dress:	e named entity see of Florida. RE: Electron mpaign Financing S AND DIRECT P () SERVICK, WILL 8020 TIGER PA FORT MYERS,	ic Signature of Registered Agr Trust Fund Contribution (). FORS: Delete IAM, LM WAY FL 33966 Delete TIA L., LM WAY	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: WILLIAM S. SERVICK PRES 02/03/2009