

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F65651

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** BEARD MARINE AIR CONDITIONING & REFRIGERATION, INC.

**Current Principal Place of Business:**

240 SW 32 COURT  
FT LAUDERDALE, FL 33315

**New Principal Place of Business:**

624 SW 24TH STREET  
FT LAUDERDALE, FL 33315

**Current Mailing Address:**

240 SW 32ND COURT  
FT LAUDERDALE, FL 33315

**New Mailing Address:**

P.O. BOX 350567  
FORT LAUDERDALE, FL 33335

**FEI Number:** 59-2187102

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HANNAH, RODERICK  
2 S UNIVERSITY DR  
PLANTATION, FL 33324 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: BEARD, LARRY,  
Address: 240 SW 32ND COURT  
City-St-Zip: FT. LAUDERDALE, FL 33315

Title: S ( ) Delete  
Name: BEARD, REBECCA  
Address: 240 SW 32ND COURT  
City-St-Zip: FT. LAUDERDALE, FL 33315

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

Title: P (X) Change ( ) Addition  
Name: BEARD, LARRY,  
Address: 624 SW 24TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33315

Title: S (X) Change ( ) Addition  
Name: BEARD, REBECCA  
Address: 624 SW 24TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33315

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: CINDY SABOURIN

MGR

03/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date