

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G44030

FILED
Apr 20, 2005
Secretary of State

Entity Name: BLALOCK'S HEATING & COOLING, INC.

Current Principal Place of Business:

1027 SE 12TH COURT
CAPE CORAL, FL 33990 US

New Principal Place of Business:

Current Mailing Address:

1027 SE 12TH COURT
CAPE CORAL, FL 33990 US

New Mailing Address:

FEI Number: 59-2330263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLALOCK, THOMAS S.
4905 SEVILLE COURT
CAPE CORAL, FL 33904 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: BLALOCK, THOMAS S.
Address: 4905 SEVILLE CT
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete
Name: BLALOCK, DEBRA G
Address: 4905 SEVILLE CT
City-St-Zip: CAPE CORAL, FL 33904

Title: CS () Delete
Name: MCINTYRE, AMY L
Address: 1109 SE 30TH STREET
City-St-Zip: CAPE CORAL, FL

Title: T () Delete
Name: ALVAREZ, TROY
Address: 2611 NE 21ST COURT
City-St-Zip: CAPE CORAL, FL 33909

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: MARIMON, VIVIAN
Address: 4504 SE 14TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: SVP (X) Change () Addition
Name: ALVAREZ, TROY
Address: 4013 NE 22ND AVE.
City-St-Zip: CAPE CORAL, FL 33909

Title: T () Change (X) Addition
Name: ALVAREZ, TROY
Address: 4013 NE 22ND AVE.
City-St-Zip: CAPE CORAL, FL 33909

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: VIVIAN MARIMON

S

04/20/2005

Electronic Signature of Signing Officer or Director

Date