2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # H12082

1. Entity Name
SOUTHERN COMFORT AIR CONDITIONING, INC.

Principal Place of Business	Mailing Address
C/O MICHAEL CORNELIUS 6219 SOMMERSET WEST LAKELAND, FL 33813-3659	C/O MICHAEL CORNELIUS 6219 SOMMERSET WEST LAKELAND, FL 33813-3659

DO NOT WRITE IN THIS SPACE

01052006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2454584
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORNELIUS, MICHAEL
6219 SOMMERSET WEST
LAKELAND, FL 33813

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CORNELIUS, MICHAEL
STREET ADDRESS	6219 SOMMERSET WEST
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	D
NAME	TIMOTHY M. CORNELIUS
STREET ADDRESS	6233 MELLO LANE
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	S
NAME	CORNELIUS, DELORES
STREET ADDRESS	6219 SOMMERSET W.
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000399739
02/01/06-80025-011 150.00

DO NOT WRITE IN THIS SPACE

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: MICHAEL W. CORNELIUS Michael W. Cornelius 1/20/06 (863) 646-6656
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #