

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J34798

FILED
Mar 07, 2006
Secretary of State

Entity Name: HARRIS OIL AND AIR CONDITIONING, INC.

Current Principal Place of Business:

21901 US HWY 441
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

% DEL G. POTTER
308 E. FIFTH AVENUE
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number: 59-2727370 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

POTTER, DEL G.
308 E. FIFTH AVENUE
MOUNT DORA, FL 32757 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: DVP () Delete
Name: HARRIS, JEAN M.,
Address: 972 OLD EUSTIS ROAD
City-St-Zip: MOUNT DORA, FL

Title: DP () Delete
Name: HARRIS, JAMES C. III,
Address: 972 OLD EUSTIS RD
City-St-Zip: MOUNT DORA, FL

Title: DT () Delete
Name: HARRIS-BURFORD, NANCY
Address: 21901 U S HIGHWAY 441
City-St-Zip: MOUNT DORA, FL 32757

Title: DS () Delete
Name: KELLEY, BROWN
Address: 2411 EAST CROOKED LAKE CLUB BLVD
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: HARRIS, JEAN M.,
Address: 22547 WOLF BRANCH ROAD
City-St-Zip: SORRENTO, FL 32776

Title: DP (X) Change () Addition
Name: HARRIS, JAMES C. III,
Address: 22547 WOLF BRANCH ROAD
City-St-Zip: SORRENTO, FL 32776

Title: DT (X) Change () Addition
Name: HARRIS-BURFORD, NANCY
Address: 22547 WOLF BRANCH ROAD
City-St-Zip: SORRENTO, FL 32776

Title: DS (X) Change () Addition
Name: BROWN, KELLEY
Address: 22605 WOLF BRANCH ROAD
City-St-Zip: SORRENTO, FL 32776

I hereby certify that the information supplied with this filing does not qualify for the 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: NANCY HARRIS BURFORD

TREA

03/07/2006

Electronic Signature of Signing Officer or Director

Date