


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90393 032 ***150.00

DOCUMENT # J37291

1. Entity Name
ARD HEATING & AIR, INC.



Principal Place of Business Mailing Address

3079 GODWIN LANE 3079 GODWIN LANE
 PENSACOLA, FL 32526 US PENSACOLA, FL 32526 US

40087743



DO NOT WRITE IN THIS SPACE

04252007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
74-2452659 Not Applicable

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

6. Name and Address of Current Registered Agent

ARD, DARRYL H
5403 SAUFLEY FIELD RD
PENSACOLA, FL 32526

DO NOT WRITE IN THIS SPACE

B. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ARD, DARRYL H
STREET ADDRESS	5403 SAUFLEY FIELD RD
CITY - ST - ZIP	PENSACOLA, FL 32526
TITLE	V
NAME	ARD, CURT D
STREET ADDRESS	5403 SAUFLEY FIELD RD
CITY - ST - ZIP	PENSACOLA, FL 32526
TITLE	T
NAME	ARD, BONNIE J
STREET ADDRESS	5403 SAUFLEY FIELD RD
CITY - ST - ZIP	PENSACOLA, FL 32526
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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:  **4-26-07** _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #