

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J45779

FILED  
Mar 17, 2008  
Secretary of State

**Entity Name:** CHADDOCK REFRIGERATION HEATING AND AIR CONDITIONING, INC.

**Current Principal Place of Business:**

2130 EMERSON STREET  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 47186  
JACKSONVILLE, FL 32247

**New Mailing Address:**

**FEI Number:** 59-2746540

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHADDOCK, THOMAS PAUL  
12960 LONGVIEW CIR  
JACKSONVILLE, FL 32223 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: PD ( ) Delete  
Name: CHADDOCK, THOMAS PAU, L  
Address: 12960 LONGVIEW CIRCLE  
City-St-Zip: JACKSONVILLE, FL

Title: V/S ( ) Delete  
Name: MATTISON, JOHN L,  
Address: 10884 KNOTTINGBY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32257 US

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

Title: PD (X) Change ( ) Addition  
Name: CHADDOCK, THOMAS PAU, L  
Address: 12960 LONGVIEW CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32223

Title: V/S (X) Change ( ) Addition  
Name: CHADDOCK, MARTHA S,  
Address: 12960 LONGVIEW CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32223 US

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: THOMAS P CHADDOCK

PD

03/17/2008

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

\_\_\_\_\_  
Date