2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J48200

Entity Name: BI-COUNTY HEATING & AIR CONDITIONING, INC.

FILED Jan 13, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

3806 LAND O'LAKE BLVD. 3806 LAND O'LAKE BLVD. P.O. BOX 356 LAND O LAKES, FL 34639 LAND O LAKES, FL 34639

New Mailing Address: Current Mailing Address:

3806 LAND O'LAKE BLVD. P.O. BOX 356 P.O. BOX 356 LAND O LAKES, FL 34639 LAND O LAKES, FL 34639

FEI Number: 59-2753279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TIPTON, BILLY G. 22104 LAVER LANE LAND O LAKES, FL 34639 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition TIPTON, BILLY G., TIPTON, BILLY G Name: Name: 22104 LAVER LN 22104 LAVER LN Address: Address: LAND O LAKES, FL City-St-Zip: City-St-Zip: LAND O LAKES, FL 34639

Title: Title: () Delete (X) Change () Addition TIPTON, KATHY, Name: Name: TIPTON, KATHY

22104 LAVER LN 22104 LAVER LN Address: Address: LAND O LAKES, FL LAND O LAKES, FL 34639 City-St-Zip: City-St-Zip:

Title: Title: () Delete D (X) Change () Addition TIPTON, BRIAN, TIPTON, BRIAN Name: Name:

22104 LAVER LN 22104 LAVER LN Address: Address: City-St-Zip: LAND O LAKES, FL City-St-Zip: LAND O LAKES, FL 34639

() Delete Title: Title: (X) Change () Addition

TIPTON, MARK, TIPTON, MARK Name: Name: Address: 22104 LAVER LN Address: 22104 LAVER LN

City-St-Zip: LAND O LAKES, FL City-St-Zip: LAND O LAKES, FL 34639

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: BILL TIPTON DP 01/13/2006