2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J78838

FILED Mar 24, 2009 Secretary of State

Entity Name: ABLE AIR CONDITIONING & REFRIGERATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	335594001			
Current Mailing Address:		New Mailing Address:		
PO BOX 1 LUTZ, FL				
FEI Number	: 59-2828809	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	AT, GARY L. BILAIRE DR. 33559 US			
,				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
	e of Florida. RE:	·		ed office or registered agent, or both,
in the Stat	e of Florida. RE:	submits this statement for the particles of Registered Agr		ed office or registered agent, or both, Date
in the Stat SIGNATU	e of Florida. RE: Electror	·		
in the Stat SIGNATU Election Ca	e of Florida. RE: Electror	nic Signature of Registered Agr	ent	Date
in the Stat SIGNATU Election Ca	e of Florida. RE: Electror mpaign Financin S AND DIREC	nic Signature of Registered Ago g Trust Fund Contribution (). TORS:) Delete ARY LEE,	ent	
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electror mpaign Financin S AND DIREC PD (1) CALLICOAT, G 2506 MOBILAII LUTZ, FL	nic Signature of Registered Agr g Trust Fund Contribution (). TORS:) Delete ARY LEE, RE DR) Delete USAN C.,	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: SUSAN CALLICOAT VPST 03/24/2009