

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J81990

FILED  
Jan 17, 2007  
Secretary of State

**Entity Name:** ADDISON & SON JANITOR & AIR CONDITIONING SERVICE, INC.

**Current Principal Place of Business:**

2609 HARRY T. MOORE AVE.  
MIMS, FL 32754

**New Principal Place of Business:**

**Current Mailing Address:**

2609 HARRY T. MOORE AVE.  
MIMS, FL 32754 US

**New Mailing Address:**

**FEI Number:** 59-2831913

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PETERS, MARK S.  
SUITE F  
150 FORTENBERRY ROAD  
MERRITT ISLAND, FL 32952 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: V ( ) Delete  
Name: ADDISON, BETTY  
Address: 2609 HARRY T MOORE AVE  
City-St-Zip: MIMS, FL

Title: PD ( ) Delete  
Name: ADDISON, WILLIE JEROD  
Address: 418 MALE PT DR  
City-St-Zip: SEFFNER, FL 33584

Title: S ( ) Delete  
Name: MACK, SHERRI,  
Address: 2609 PALMETTO AVE.  
City-St-Zip: MIMS, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: ADDISON, WILLIE JJAMES  
Address: 2609 HARRY T. MOORE AVE.  
City-St-Zip: MIMS, FL 32754

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CH ( ) Change (X) Addition  
Name: WILLIE JEROD ADDISO, N  
Address: 12107 FOX BLOOM AVE  
City-St-Zip: GIBSONTON, FL 33534

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: WILLIE J. ADDISON

PD

01/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date