

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L04569

Entity Name: AIR EXCELLENCE, INC.

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

3604-A CENTURY BLVD.
C/O CLAUDE RAY JOHNSON
LAKELAND, FL 33811 US

Current Mailing Address:

3604-A CENTURY BLVD.
C/O CLAUDE RAY JOHNSON
LAKELAND, FL 33811 US

New Principal Place of Business:

3604 CENTURY BLVD.
A
LAKELAND, FL 33811 US

New Mailing Address:

3604 CENTURY BLVD.
A
LAKELAND, FL 33811 US

FEI Number: 59-2959374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, CLAUDE RAY
1103 OLD POLK CITY RD.
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

JOHNSON, CLAUDE R PRES.
1103 OLD POLK CITY RD.
LAKELAND, FL 33809 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: CLAUDE R. JOHNSON

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPTC () Delete
Name: JOHNSON, CLAUDE RAY
Address: 1103 OLD POLK CITY RD
City-St-Zip: LAKELAND, FL 33809

Title: DVS () Delete
Name: JOHNSON, NINA JO
Address: 1103 OLD POLK CITY RD
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTC (X) Change () Addition
Name: JOHNSON, CLAUDE R PRES.
Address: 1103 OLD POLK CITY RD
City-St-Zip: LAKELAND, FL 33809

Title: DVS (X) Change () Addition
Name: JOHNSON, NINA J V. PRES
Address: 1103 OLD POLK CITY RD
City-St-Zip: LAKELAND, FL 33809

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: CLAUDE R. JOHNSON

PRES

01/21/2009

Electronic Signature of Signing Officer or Director

Date