


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L10740
 1. Entity Name
BILL'S AUTO AIR, INC.



Principal Place of Business BILL'S AUTO AIR 1619 PARK COMMERCE COURT ST. CLOUD, FL 34769 US	Mailing Address BILL'S AUTO AIR 1619 PARK COMMERCE COURT ST. CLOUD, FL 34769 US
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01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2973836	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**GRAFTON, WILLIAM
 1619 PARK COMMERCE CT
 ST CLOUD, FL 34769**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE D	GRAFTON, WILLIAM W 1619 PARK COMMERCE CT SAINT CLOUD, FL 34769
TITLE V	GRAFTON, LINDA A 1619 PARK COMMERCE CT SAINT CLOUD, FL 34769
TITLE NAME	
TITLE NAME	
TITLE NAME	
TITLE NAME	

1100000403456
 02/06/06-80007-022 (150.11)

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda A Grafton* **Linda A. GRAFTON** 1-17-06 407-892-2599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
ice President of
Asceline Inc