2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

	AMENDED AM	IOAL KLIOK								
DOCUMENT #L13598										
1. Entity Name GRADY AIR CONDITIONING & HEATING, INC.										
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Principal Place of Business Mailing Address								=		
11038 MONTEALM RD. 11038 MONTCALM RD.					را در. در این در	.URE IMAY D .LAHASSEE	F STAL	-		
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2. Principal Place of Business - No P.O. Box # 3. Mailing Address 217 NORTH LEMONAVE. 217 NORTH LEM			EMON AU	ε						
Suite, Apt. #, etc. Suite, Apt. #, etc.					07072008	Chg-P	CR2E03	34 (12/06)		
	KSVILLE FLORIDA	BROOKS VILLE FLORIDA		R	4. FEI Number 59-2968			J	plied For t Applicable	
Zip 3460	O Country USA	34601	Country U.S.A		5. Certificate of	of Status Desired		\$8.75 Addi Fee Required		
	6. Name and Address of Current R				7. Name and	Address of New R			-	
ODADY F	HOENEN		Name				_			
GRADY, EUGENE V. 11038 MONTCALM RD. SPRING HILL, FL. 34608				Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Code	9	
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									and accept	
the obligations of registered agent.										
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)										
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.								5		
						· , <u>.</u> ,				
10. MLE	OFFICERS AND E	Delete	11.	.,	ADDITIONS/C	CHANGES TO OFF	ICERS AND			
NAME	GRADY, EUGENE V.	L., J Delete	NAME	680	m Eug	SENE V		Change	☐ Addition	
STREET ADDRESS	11038 MONTCALM RD. STREE			GRADY EUGENE V						
CITY-ST-ZIP	SPRING HILL, FL	- · · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP	3,2	PEING HI	111, FL 34	608			
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STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP							
			CALL OI-ER							

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.

CICHATURE. Gugene V. Gudy VICE PRESIDENT JULY 8, 2008