2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L29463

FILED Mar 18, 2004 Secretary of State

Entity Name: CUSTOM COOLING & HEATING, INC.

Current Principal Place of Business: New Principal Place of Business:

3591 TRAIL DAIRY CR N. FT. MYERS, FL 33917 US

Current Mailing Address: New Mailing Address:

3591 TRAIL DAIRY CR

N. FT. MYERS, FL 33917 US

FEI Number: 65-0158684 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ELLSWORTH, GEORGE J. ELLSWORTH, GEORGE J. 3591 TRAIL DAIRU CR 3591 TRAIL DAIRY CR

NORTH FT. MYERS, FL 33917 NORTH FT. MYERS, FL 33917 US 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: 03/18/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ELLSWORTH, GEORGE J., ELLSWORTH, GEORGE J., Name: Name: 3591 TRAIL DAIRY CT 3591 TRAIL DAIRY CIR Address: Address: City-St-Zip:

N FT MYERS. FL City-St-Zip: N FT MYERS. FL

Title: Title: (X) Change () Addition () Delete ELLSWORTH, CHERI, Name: Name: ELLSWORTH, CHERI,

3591 TRAIL DAIRY CT 3591 TRAIL DAIRY CIR Address: Address: N FT MYERS, FL N FT MYERS, FL City-St-Zip: City-St-Zip:

() Delete Title: Title: () Change () Addition

CHARNEY, JOSEPH Name: Name: 2838 BRUCE ST Address: Address: City-St-Zip: MATLACHA, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHERI ELLSWORTH S 03/18/2004