SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 87/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DOCUMENT # M91267 (8)	
KENNEDY AIR CONDITIONING, INC.	II 1861 BIGH BIRN ANDN ANDN BIGH BIGH BIRN GER II GE
Principal Place of Business Mailing Address	
825 11TH DRIVE SW. % ROBERT J. KENNEDY VERO BEACH FL 32962 VERO BEACH FL 32962	
US 3. Date Incorporated or Qualifi 07/22/1988	ed 3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 26 825 リューション・ 65-0064125	Applied For Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc 5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State Trust Fund Contribution	
	for intangible tax under s 199 032. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New	· · · · · · · · · · · · · · · · · · ·
KENNEDY, ROBERT J. 825 11TH DRIVE SW. 82 Street Address (P.O. Box Number is Not Accept	utable)
VERO BEACH FL 32962	
84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	e purpose of changing its registered ept the appointment as registered
SIGNATURE Signature typed or printed name of registered agent and time! appositation (NOTE, Registered Agent signature required when recryating):	[IA]t
	FFICERS AND DIRECTORS IN 12
TITLE PD DELETE STITLE	Change Addition
NAME KENNEDY, ROBERT J. 12 NAME	
STREET ADDRESS 825 11TH DRIVE, SW 1.3 STREET ADDRESS	
CITY-ST-ZIP VERO BEACH FL	Change Addition
NAME 22 NAME	Change Abutton .
STREET ADDRESS 2 3 STREET ADDRESS	
CITY-ST-ZIP 2 4 CITY-ST-ZIP	
TITLE DELETE 31 TITLE	Change Addition
NAME 32 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 34.C(Y-ST-ZIP	
TITLE DELETE 41TITLE NAME 4 2 NAME	Change Addition
CITY-ST-ZIP	Change Addition
NAME 52 NAME	
STREET ADDRESS 53 STREET ADDRESS	1
CITY-ST-ZIP 54CITY-ST-ZIP	
PATLE DELETE 61 TITLE	Change Addition
NAME 62 NAME	
STREET ADDRESS 63 STREET ADDRESS	
CITY-ST-ZIP 64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRHYEO NAME OF SIGNING OFFICER OR DIRECTOR