

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000032317

FILED
Jun 01, 2008
Secretary of State**Entity Name:** EDGES AIR CONDITIONING & HEATING SERVICE, INC.**Current Principal Place of Business:**12531 WEST NEWBERRY ROAD
NEWBERRY, FL 32669 US**New Principal Place of Business:****Current Mailing Address:**POST OFFICE BOX 357250
GAINESVILLE, FL 32635 US**New Mailing Address:****FEI Number:** 59-3632489**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**EDGE, THOMAS D OWNER
12531 WEST NEWBERRY ROAD
NEWBERRY, FL 32669 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: EDGE, THOMAS D
Address: 12531 W. NEWBERRY RD.
City-St-Zip: NEWBERRY, FL 32669**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** O () Change (X) Addition
Name: EDGE, DOLORES
Address: 12431 WEST NEWBERRY ROAD
City-St-Zip: NEWBERRY, FL 32669

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: THOMAS D EDGE

PD

06/01/2008

Electronic Signature of Signing Officer or Director

Date