

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035016

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** A BETTER SOLUTION COMFORT SYSTEMS, INCORPORATED

**Current Principal Place of Business:**

1908 W AILEEN ST.  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

1908 W AILEEN ST.  
TAMPA, FL 33607

**New Mailing Address:**

FEI Number: 59-3634352

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WORKMAN, DOUGLAS A  
1908 W AILEEN ST  
TAMPA, FL 33607 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  
Name: WORKMAN, DOUGLAS A  
Address: 1908 W. AILEEN ST.  
City-St-Zip: TAMPA, FL 33607

I hereby 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 all other like empowered.

SIGNATURE: DOUGLAS A WORKMAN

PRES

04/20/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date