FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) FIFED DOCUMENT # Ken Williams AIr Conditioning INC. 02 OCT -7 AM 8: 39 10000041365 SECREMMY OF STATE TALLAHASSEE, FLORIDA 600008315316--7 -10/10/02--01089--018 DO NOT WRITE IN THIS SPACE *****B1.25 ****61.25 2. Principal Place of Business Majing Address 6927 VICKIE Clrcle 6927 VICKIE CIrcle DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3639199 west Melbourne FL. Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent "Kenneth D. WIII Ams DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 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. eneth O. Williams Kerneth D. WIllams (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible -10. Election Campaign Financing After May 1, Fee is \$550.00 Tax filing requirement and elects to do so. \$5.00 May Be Amended UBR is \$61,25 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE CR2E034B (12/01) Kenneth D. Williams 1610 NOVMAN Drive NAME NAME STREET ADDRESS STREET ADDRESS Melbourne FC. 32901 CITY-ST-7IP CITY-ST-ZIP VICE President TITLE NAME Kenneth D. WILLAMS NAME STREET ADDRESS 1610 Norman Dylue. Melbourne FL. 32901 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Secretary TITLE TITLE Kenseth D.WIIllams 1610 Norman Dr. Melbourne FL 32901 STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP tRessurer TITLE TITLE IN THIS SPACE Kenneth D. Williams NAME STREET ADDRESS 1610 NORMANDY. Melbound FL 32901 STREET ADDRESS CITY-ST-7JF CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE

13. Thereby certify that the information supplied with this filling does not qualify 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 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 11 or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

NAME

SIGNATURE: Keneth D. Willand Kenneth D. WI SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Kenneth D. Williams

NAME

STREET ADDRESS

CITY-ST-ZIP

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of $FloR + DA$
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: KEN WILLIAMS AIR CONDITIONING, INC
2. The mailing address of the corporation: 6927 VICKIE CIRCLE, UN=T E WEST MELBOURNE, FL. 32904
3. Date of incorporation/qualification: 4/21/2000 Document number: P00000041365
4. The name and address of the current registered agent and office:
BOGDANSK, ALAN J.
1027 Elms FORD ST., N.W.
PALM BAY, FL 32907
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P: O. Box Not Acceptable)
KEN WILLAMS
1610 NORMAN DR.
MEI BOURNE FL 32901
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical:
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board). (Date)
PRESEDENT (Printed or typed name and tifle)
laving been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the prov isions of all statutes relative to the prope r and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
Keneth D. Willows Sept 12, 02 (Signature of Registered Agent) (Date)
f signing on behalf of an entity: Kenneth D. W///Ams (Typed or Printed Name) (Capacity)
* *-*-FIEING-FEE: \$35:00 *-*-*

CR2E045(9/00)

C DIVISION OF CORPORATIONS

P:O: Box-6327

TALLAHASSEE, FL 32314-

OFFICER / DIRECTOR RESIGNATION

I, ALAN J. BOGDANSKI, hereby resign as SECRETARY /TREASURE R
of KEN WILLIAMS AIR CONDITIONING, INC., (Name of Corporation)
a corporation organized under the laws of the State of
and affirm that the corporation has been notified in writing of the resignation.
(Signature of resigning officer/director)

FILING FEE 1S \$35.00"

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Eallahassee, FL. 32314