2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: LA to A to

May 02, 2005 8:00 am Secretary of State DOCUMENT # P01000005516 05-02-2005 90473 030 ***150 00 ACADIAN AUTO & A/C, INC. Principal Place of Business Mailing Address **501 SOUTH L STREET** 501 SOUTH L STREET PENSACOLA, FL 32501 PENSACOLA, FL 32501 2. Principal Place of Business 3. Mailing Address 10879 Berryhill Road 10879 Berryhill Road Suite, Apt. #, etc. Suite, Apt. #, etc. 04252005 Chq-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Pensacola, 59-3692976 Not Applicable Pensacola, FL Country Country \$8.75 Additional 5. Certificate of Status Desired 32506 U.S.A 32506 U.S.A. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Brecheen, Antoinette BRECHEEN, DANIEL J 7400 HARVEY STREET Street Address (P.O. Box Number is Not Acceptable) 10879 Berryhill Road PENSACOLA, FL 32506 Pensacola 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. (am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITI F Change ☐ Addition BRECHEEN, DANIEL J NAME NAME STREET ADDRESS 7400 HARVEY STREET STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32506 CITY-ST-ZIP TITLE 🔼 Change ☐ Delete TITLE ☐ Addition **BRECHEEN, ANTOINETTE** NAME NAME Brecheen, Antoinette STREET ADDRESS 7400 HARVEY STREET STREET ADDRESS 10879 Berryhill Road PENSACOLA, FL 32506 CITY-SI-ZIE CITY-ST-ZIP Pensacola, FL TITLE Change Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP TITI F TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITL F ☐ Delete THILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ntrinette Brecheen

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