

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000026067

FILED
Apr 30, 2008
Secretary of State

Entity Name: HUFF'S QUALITY AIR CONDITIONING, INC.

Current Principal Place of Business:

4851 MEADOW DR.
ST. CLOUD, FL 34772

New Principal Place of Business:

2004 JAFFA DRIVE
SUITE A
ST. CLOUD, FL 34771

Current Mailing Address:

4851 MEADOW DR.
ST. CLOUD, FL 34772

New Mailing Address:

4417 13TH STREET
SUITE #309
ST. CLOUD, FL 34769

FEI Number: 59-3705453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUFF, EDWARD
4851 MEADOW DR.
ST. CLOUD, FL 34772 US

Name and Address of New Registered Agent:

HUFF, EDWARD
4417 13TH STREET
SUITE #309
ST. CLOUD, FL 34769 US

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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HUFF, EDWARD
Address: 4851 MEADOW DR.
City-St-Zip: ST. CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: HUFF, EDWARD
Address: 4417 13TH STREET, SUITE #309
City-St-Zip: ST. CLOUD, FL 34769

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: EDWARD HUFF

O

04/30/2008

Electronic Signature of Signing Officer or Director

Date