## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000035547

FILED Apr 12, 2005 Secretary of State

Entity Name: DELAPORTE'S HEATING & COOLING OF THE TREASURE COAST, INC. **Current Principal Place of Business: New Principal Place of Business:** 3901 OKEECHOBEE ROAD FORT PIERCE, FL 34947 **Current Mailing Address: New Mailing Address:** 3901 OKEECHOBEE ROAD FORT PIERCE, FL 34947 FEI Number: 65-1099767 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DELAPORTE, FRANK 3901 OKEECHOBEE ROAD FORT PIERCE, FL 34947 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition DELAPORTE, FRANK JR DELAPORTE, FRANK Name: Name: 4859 HONEYSUCKLE DRIVE 9514 SHADOW LANE Address: Address: City-St-Zip: MICCO, FL 32976 City-St-Zip: FORT PIERCE, FL 34951

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DELAPORTE, FRANK
 Name:

 Address:
 9514 SHADOW LANE
 Address:

 City-St-Zip:
 FORT PIERCE, FL 34951
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK DELAPORTE PRES 04/12/2005