


FILED
Jun 04, 2008 8:00 am
Secretary of State

06-04-2008 90001 012 ***150.00

**2008 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P01000085025

1. Entity Name
 AIR ADVANTAGE HEATING AND COOLING, INC.



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|--|--|
| Principal Place of Business 5611 2ND ST W. LEHIGH ACRES, FL 33971 US | Mailing Address 5611 2ND ST W. LEHIGH ACRES, FL 33971 US |
|--|--|

40107438



04152008 No Chg-P CR2E034 (11/05)

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| | |
|---|--------------------------------|
| 4. FEI Number 65-1139377 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

BRAMHELL, SCOTT
 12403 PEBBLE STONE CT
 FORT MYERS, FL 33912

**DO NOT WRITE
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D BRAMHALL, SCOTT C 12403 PEBBLE STONE CT FORT MYERS, FL 33912 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D DIAL, RAY S 3902 38TH STREET SW LEHIGH ACRES, FL 33971 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: *AShan* _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #