

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000097660

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: COMFORT CARE AIR CONDITIONING, INC.

**Current Principal Place of Business:**

1831 OAK FOREST DRIVE S  
CLEARWATER, FL 337591821

**New Principal Place of Business:**

**Current Mailing Address:**

1831 OAK FOREST DRIVE S  
CLEARWATER, FL 337591821

**New Mailing Address:**

FEI Number: 59-3747802

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPURR, ROBERT  
1831 OAK FOREST DRIVE S  
CLEARWATER, FL 337591821 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SPURR, ROBERT  
Address: 1831 OAK FOREST DRIVE S  
City-St-Zip: CLEARWATER, FL 337591821

Title: VD ( ) Delete  
Name: SPURR, DANIEL  
Address: 1837 OAK FOREST DRIVE S  
City-St-Zip: CLEARWATER, FL 33759

Title: TRS ( ) Delete  
Name: SPURR, PAUL R  
Address: 1831 OAK FOREST DRIVE S.  
City-St-Zip: CLEARWATER, FL 33759

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT T. SPURR

PRES

03/31/2009

Electronic Signature of Signing Officer or Director

Date