

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000004517

FILED
May 23, 2005
Secretary of State

Entity Name: TOM MOORE HEATING AND COOLING, INC.

Current Principal Place of Business:

1537 EXCALIBUR ST
HOLIDAY, FL 34690

New Principal Place of Business:

6337 OLD MAIN STREET
NEW PORT RICHEY, FL 34653

Current Mailing Address:

1537 EXCALIBUR ST
HOLIDAY, FL 34690

New Mailing Address:

6025 CENTRAL AVENUE
NEW PORT RICHEY, FL 34653

FEI Number: 59-3662737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOORE, THOMAS A
1537 EXCALIBUR ST
HOLIDAY, FL 34690 US

Name and Address of New Registered Agent:

MOORE, THOMAS A
6025 CENTRAL AVEUE
NEW PORT RICHEY, FL 34653 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:

05/23/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: MOORE, THOMAS A
Address: 1537 EXCALIBUR ST
City-St-Zip: HOLIDAY, FL 34690

Title: PD () Delete
Name: MOORE, ANN D
Address: 1537 EXCALIBUR ST
City-St-Zip: HOLIDAY, FL 34690

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change () Addition
Name: MOORE, THOMAS A
Address: 6025 CENTRAL AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: PD (X) Change () Addition
Name: MOORE, ANN D
Address: 6025 CENTRAL AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34653

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: THOMAS A. MOORE

VP

05/23/2005

Electronic Signature of Signing Officer or Director

Date