

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006753

FILED
Feb 27, 2006
Secretary of State

Entity Name: AIR SOLUTIONS HEATING AND COOLING, INC.

Current Principal Place of Business:

4725 HIGHWAY AVE
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

4725 HIGHWAY AVE
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: 04-3589598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCZALE, LESLIE S
9170 LATIMER RD WEST
JACKSONVILLE, FL 32257 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: COTHREN, BRIAN D
Address: 923 FLOYD STREET
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VD () Delete
Name: QUILLEN, WILLIAM E SR
Address: 279 MONTEGO WAY
City-St-Zip: PONTE VEDRA, FL 32802

Title: STD (X) Delete
Name: KINSER, PAUL G
Address: 12341 BRIGHTON BAY TRAIL SOUTH
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COTHREN, BRIAN D
Address: 7686 RIVER AVE.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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 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: BRIAN COTHERN

PD

02/27/2006

Electronic Signature of Signing Officer or Director

Date