

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006989

FILED
Mar 22, 2005
Secretary of State

Entity Name: J & B GOULD AIR CONDITIONING AND HEATING INC.

Current Principal Place of Business:

506 OAKWOOD AVENUE
NEW SMYRNA, FL 32169

New Principal Place of Business:

2610 FAIRMONT AVENUE
NEW SMYRNA, FL 32168

Current Mailing Address:

506 OAKWOOD AVENUE
NEW SMYRNA, FL 32169

New Mailing Address:

2610 FAIRMONT AVENUE
NEW SMYRNA, FL 32168

FEI Number: 30-0032792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOULD, LOREN
94 AQUA COURT
NEW SMYRNA, FL 32168 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: P () Delete
Name: GOULD, JEREMIAH R
Address: 506 OAKWOOD AVE.
City-St-Zip: NEW SMYRNA, FL 32169

Title: V () Delete
Name: GOULD, BENJAMIN J
Address: 94 AQUA CT.
City-St-Zip: NEW SMYRNA, FL 32168

Title: S () Delete
Name: GOULD, LOREN
Address: 94 AQUA CT.
City-St-Zip: NEW SMYRNA, FL 32168

Title: T () Delete
Name: GOULD, BRIANA
Address: 506 OAKWOOD AVE.
City-St-Zip: NEW SMYRNA, FL 32169

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOULD, JEREMIAH R
Address: 2610 FAIRMONT AVENUE
City-St-Zip: NEW SMYRNA, FL 32168

Title: V (X) Change () Addition
Name: GOULD, BENJAMIN J
Address: 2537 FAIRFAX AVENUE
City-St-Zip: NEW SMYRNA, FL 32168

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

Title: T (X) Change () Addition
Name: GOULD, BRIANA
Address: 2610 FAIRMONT AVENUE
City-St-Zip: NEW SMYRNA, FL 32168

Title: D () Change (X) Addition
Name: CHAVERRI GARCIA, PATSY
Address: 2537 FAIRFAX AVENUE
City-St-Zip: NEW SMYRNA, FL 32168

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: LOREN GOULD

S

03/22/2005

Electronic Signature of Signing Officer or Director

Date