


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000014600 1. Entity Name BRAD'S ELECTRIC & AIR CONDITIONING, INC.	
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Principal Place of Business 349 SW LUCERO DR. PORT ST. LUCIE, FL 34983	Mailing Address 349 SW LUCERO DR. PORT ST. LUCIE, FL 34983
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DO NOT WRITE IN THIS SPACE

01202005 No Chg-P CR2E034 (10/03)

4. FEI Number 03-0388049	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CROOKS, BRADLEY SR.
349 SW LUCERO DR.
PORT ST. LUCIE, FL 34983

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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 Bradley W Crooks President 3/7/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS CROOKS, PAULA M 349 SW LUCERO DR PORT ST. LUCIE, FL 39483
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CROOKS, BRADLEY W 349 SW LUCERO DR. PORT ST. LUCIE, FL 34983
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC CROOKS, ELISSA A SEC 349 SW LUCERO DR. PORT ST LUCIE, FL 34983
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Bradley W Crooks 3/7/05 772-878-9872
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #