

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018175

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** COOL BREEZE HEATING & COOLING, INC.

**Current Principal Place of Business:**

4705 FT. HAMER ROAD  
PARRISH, FL 34219

**New Principal Place of Business:**

12244 US HIGHWAY 301 NORTH  
PARRISH, FL 34219

**Current Mailing Address:**

4705 FT. HAMER ROAD  
PARRISH, FL 34219

**New Mailing Address:**

12244 US HIGHWAY 301 NORTH  
PARRISH, FL 34219

**FEI Number:** 37-1421495

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MC HENRY, KENNY  
4705 FT. HAMER ROAD  
PARRISH, FL 34219 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: MC HENRY, KENNY  
Address: 4705 FT. HAMER ROAD  
City-St-Zip: PARRISH, FL 34219

Title: SVM ( ) Delete  
Name: MC HENRY, TRACY  
Address: 4705 FT. HAMER ROAD  
City-St-Zip: PARRISH, FL 34219

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

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:** TRACY MC HENRY

SVM

04/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date