2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000041995 1. Entity Name GOOD! OL BOYS AIR CONDITIONING &

FILED Feb 02, 2007 08:00 AM Secretary of State

REFRIGI	ERATION, INC.						
Principal Place of Business 115 TRACY WAY LAKELAND, FL 33809 Mailing Address 115 TRACY WAY LAKELAND, FL 33809							
DO NOT WRITE IN THIS SPACE				01282007 4. FEI Numbe 04-3642	<u> </u>	E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
115 TRAC	, THOMAS C	DO NOT WRITE IN THIS SPACE					
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 Signature, typed or printed name of registered agent and title it applicable. (NOTE. Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be ed to Fees			
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIF PD HOWARD, THOMAS C 115 TRACY WAY LAKELAND, FL 33809 VD	EĆTÒRS				3 C	
NAME STREET ADDRESS CITY-ST-DP TITLE NAME	RICH, FRED 19110 ALICE CR LUTZ, FL 33858		·—		0000006174 02/07/07-80070	6-017 150.00	
STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP					NOT WRIT		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME							
STREET ADDRESS City-St-Zip							

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 only a attachment with an address, with all other like empowered.

SIGNATURE:

MesiD. SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

863-815-3344