

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048235

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: ALL FLORIDA HEATING & AIR CONDITIONING, INC.

## Current Principal Place of Business:

1402 SW EMPIRE STREET  
PORT SAINT LUCIE, FL 34983

## New Principal Place of Business:

2208 SE GLOVER STREET  
PORT SAINT LUCIE, FL 34984

## Current Mailing Address:

P.O. BOX 880967  
PORT SAINT LUCIE, FL 34988

## New Mailing Address:

FEI Number: 04-3654950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MYERS, SHERRY A  
1813 SE GENARO TERRACE  
PORT SAINT LUCIE, FL 34952 US

## Name and Address of New Registered Agent:

MYERS, SHERRY A  
2208 SE GLOVER STREET  
PORT SAINT LUCIE, FL 34984 US

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:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MYERS, SHERRY A  
Address: 1813 SE GENARO TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

Title: VST ( ) Delete  
Name: MYERS, FRED R JR.  
Address: 1402 S.W. EMPIRE ST.  
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: V (X) Delete  
Name: MYERS, FREDERICK R SR.  
Address: 1813 SE GENARO TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MYERS, SHERRY A  
Address: 2208 SE GLOVER STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34984 US

Title: VST (X) Change ( ) Addition  
Name: MYERS, FRED R JR.  
Address: 1814 SW NORMAN LN  
City-St-Zip: PORT ST. LUCIE, FL 34984 US

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: SHERRY A. MYERS

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date