

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000065873

FILED
Jul 23, 2009
Secretary of State

Entity Name: AKINS HEATING AND AIR CONDITIONING, INC.

Current Principal Place of Business:

5120 NW 5TH ST
BELL, FL 32619

New Principal Place of Business:

Current Mailing Address:

5120 NW 5TH ST
BELL, FL 32619

New Mailing Address:

PO BOX 38
BELL, FL 32619

FEI Number: 81-0558060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, RAY E JR
3259 WEST BRYANT AVENUE
BELL, FL 32619 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FAUGHT, MICHAEL
Address: 5120 NW 5TH ST
City-St-Zip: BELL, FL 32619

Title: S () Delete
Name: AKINS, STANLEY
Address: 5120 NW 5TH ST
City-St-Zip: BELL, FL 32619

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: MICHAEL FAUGHT

PRES

07/23/2009

Electronic Signature of Signing Officer or Director

Date