

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000076837

FILED
Apr 21, 2009
Secretary of State

Entity Name: PORT ST. JOHN AIR CONDITIONING, INC.

Current Principal Place of Business:

645 S. PLUMOSA STREET #6
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

645 S. PLUMOSA STREET #6
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 54-2064811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOVITZ, KIMBERLY
645 S. PLUMOSA STREET #6
MERRITT ISLAND, FL 32952 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: PT () Delete
Name: JACOVITZ, KIMBERLY
Address: 13 COUNTRY CLUB RD
City-St-Zip: COCOA BEACH, FL 32937

Title: VP () Delete
Name: KOSIBA, WILLIAM
Address: 4290 SKYWAY DR
City-St-Zip: PORT ST. JOHN, FL 32927

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JACOVITZ, KIMBERLY
Address: 11 COUNTRY CLUB RD
City-St-Zip: COCOA BEACH, FL 32937

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: KIMBERLY JACOVITZ

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date