

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014230

FILED
Mar 20, 2007
Secretary of State

Entity Name: WILCO HEATING & AIR CONDITIONING, INC.

Current Principal Place of Business:

1831 COOLIDGE AVENUE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

1831 COOLIDGE AVENUE
SANFORD, FL 32771 US

New Mailing Address:

P.O. BOX 952020
LAKE MARY, FL 32795 US

FEI Number: 65-1170963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ANDRAE S
1831 COOLIDGE AVE.
SANFORD, FL 32771 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: WILLIAMS, ANDRAE
Address: 1831 COOLIDGE AVENUE
City-St-Zip: SANFORD, FL 32771

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC () Change (X) Addition
Name: WILLIAMS, TAMIKA SEC
Address: 1831 COOLIDGE AVE.
City-St-Zip: SANFORD, FL 32771 US

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: ANDRAE WILLIAMS

PD

03/20/2007

Electronic Signature of Signing Officer or Director

_____ Date