2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2005 08:00 AM Secretary of State

DOCUMENT # P03000081546 1. Entity Name H.J.WILSON & SON AIR CONDITIONING, INC.					J
		Mailing Address 4510 FLINTLOCK LOOP LAKELAND, FL 33810			OF COURT DUM SCHOOL DUMSEL TO LOUIS
D	O NOT WRITE 8. Name and Address of Current R		CE		Applied For Not Applicable \$8.75 Additional Fee Required
WILSON-FERRIE, MELISSA A 120 E. PINE STREET SUITE 2 LAKELAND, FL 33809 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 Signalure, typed or printed name of registered agent and the if applicable (NOTE. Registered Agent signature required when refinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D D WILSON, HARLEY J III 4510 FLINTLOCK LOOP LAKELAND, FL 33810	RECTORS	THE STATE OF THE S	U0000028 04/04/U5-81	38074 3094-010 150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRI	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPAC	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall be the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of qualities 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 on an attachment with an address, with all other like empowered. SIGNATURE:					
	SIGNATURE AND TYPED OR PE	NTED HARE OF SIGNING OFFICER OR DIREC	JOR.	Date /	Daytime Phone #