

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000123172

FILED
Apr 22, 2005
Secretary of State

Entity Name: ISTACHATTA HEATING & AIR CONDITIONING, INC.

Current Principal Place of Business:

28135 OAKDENE DR
BROOKSVILLE, FL 346014384 US

New Principal Place of Business:

28120 MAGNON DRIVE
POB 191
ISTACHATTA, FL 346360191 US

Current Mailing Address:

PO BOX 191, 28135 OAKDENE DR
ISTACHATTA, FL 346360191

New Mailing Address:

PO BOX 191
ISTACHATTA, FL 346360191 US

FEI Number: 20-0367055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTINSON, MARILEE D
PO BOX 191, 28135 OAKDENE DR
ISTACHATTA, FL 346360191 US

Name and Address of New Registered Agent:

MARTINSON, MARILEE D V
PO BOX 191
28120 MAGNON DRIVE
ISTACHATTA, FL 346360191 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: MARILEE D MARTINSON

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINSON, JIM
Address: PO BOX 191, 28135 OAKDENE DR
City-St-Zip: ISTACHATTA, FL 346360191 US

Title: V () Delete
Name: MARTINSON, MARILEE D
Address: PO BOX 191, 28135 OAKDENE DR
City-St-Zip: ISTACHATTA, FL 346360191 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARTINSON, JIM C
Address: PO BOX 191, 28120 MAGNON DR
City-St-Zip: ISTACHATTA, FL 346360191 US

Title: V (X) Change () Addition
Name: MARTINSON, MARILEE D V
Address: PO BOX 191, 28120 MAGNON DR
City-St-Zip: ISTACHATTA, FL 346360191 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARILEE D MARTINSON

VP

04/22/2005

Electronic Signature of Signing Officer or Director

Date