2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Äpr 13, 2005 08:00 AM Secretary of State DOCUMENT # P03000126858 GEORGE DALLER AIR CONDITIONING & HEATING, INC. Principal Place of Business Mailing Address 115 CHEROKEE DRIVE ORMOND BEACH FL 32174 115 CHEROKEE DRIVE ORMOND BEACH FL 32174 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 20-0366528 Not Applicable Country Country \$8.75 Additional Zip Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DALLER, GEORGE 115 CHEROKEE DRIVE Street Address (P.O. Box Number is Not Acceptable) ORMOND BEACH FL 32174 Zip Code 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 (NOTE Registered Agent signature required when reinstating) DATE d agent and tille if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change Addition TITLE ם Delete HILE DALLER, GEORGE NAME NAME U00000301667 04/13/05-80042-006 150.00 STREET ADDRESS 115 CHEROKEE DRIVE STREET ADDRÉSS ORMOND BEACH FL 32174 CHY-ST-ZIP City-St-7IP Change Addition Delete uue TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete THEE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Addition Delete HTCF TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST- AP CITY-ST-71P Change ☐ Addition Delete ittte NAME NAME STREET ADDRESS STREET ADDRESS CITY, ST-71P City-St-70 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

George DALLER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**