## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000128834

Entity Name: A-BETTER AIR CONDITIONING CO. INC.

FILED Mar 24, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

3905 EDGAR AVE. 9520 PALISADES PARK RD.

BOYNTON BEACH, FL 33436 US BOCA RATON, FL 33428 US

Current Mailing Address: New Mailing Address:

3905 EDGAR AVE. 9520 PALISADES PARK RD. BOYNTON BEACH, FL 33436 US BOCA RATON, FL 33428 US

FEI Number: 65-0395873 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHEPPARD, MICHAEL L
3905 EDGAR AVE
BOYNTON BEACH, FL 33436 US
SHEPPARD, MICHAEL L
9520 PALISADES PARK RD.
BOCA RATON, FL 33428 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: 03/24/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name:SHEPPARD, MICHAEL LName:SHEPPARD, MICHAEL LAddress:3905 EDGAR AVEAddress:9520 PALISADES PARK RD.

City-St-Zip: BOYNTON BEACH, FL 33436 US City-St-Zip: BOCA RATON, FL 33428 US

Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition Name: COFFEY, CHRISTOPHER D Name: NOLAN, LINDY L

Address: 299 SW 11TH AVE Address: 9528 PALISADES PARK RD.

City-St-Zip: BOCA RATON, FL 33486 US City-St-Zip: BOCA RATON, FL 33428 US

Title: DIR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DURRETTE, TÓM A
 Name:

 Address:
 738 SOUTH LAKE AVE
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33443 US
 City-St-Zip:

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: MICHAEL L SHEPPARD P 03/24/2005