


FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90071 029 ***158.75

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000128904 1. Entity Name FLEMING AIR & ELECTRIC, INC.	
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Principal Place of Business 1051 EAST DUVAL STREET LAKE CITY, FL 32055	Mailing Address 1051 EAST DUVAL STREET LAKE CITY, FL 32055
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DO NOT WRITE IN THIS SPACE



01032006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3291563	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FLEMING, HATTIE 1051 EAST DUVAL STREET, SUITE 101 LAKE CITY, FL 32055	DO NOT WRITE IN THIS SPACE
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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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FLEMING, ERVIN 1051 EAST DUVAL ST., SUITE 101 LAKE CITY, FL 32055
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP FLEMING, HATTIE 1051 EAST DUVAL STREET, SUITE 101 LAKE CITY, FL 32055
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: Hattie Fleming Hattie Fleming 1/4-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1/4/06 386-9619770
Date Daytime Phone #