

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000129317

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: JEMISON HEATING & COOLING, INC.

## Current Principal Place of Business:

22949 NW BLACKBOTTOM RD  
ALTHA, FL 32421

## New Principal Place of Business:

22417 NW WATSON RD.  
ALTHA, FL 32421

## Current Mailing Address:

22949 NW BLACKBOTTOM RD  
ALTHA, FL 32421

## New Mailing Address:

22417 NW WATSON RD.  
ALTHA, FL 32421

FEI Number: 35-2218660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JEMISON, DAVID A  
22949 NW BLACKBOTTOM RD  
ALTHA, FL 32421 US

## Name and Address of New Registered Agent:

JEMISON, DAVID A  
22417 NW WATSON RD.  
ALTHA, FL 32421 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: DAVID A. JEMISON

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: JEMISON, DAVID A  
Address: 22949 NW BLACKBOTTOM RD  
City-St-Zip: ALTHA, FL 32421

Title: DV ( ) Delete  
Name: JEMISON, GARY A  
Address: 22949 NW BLACKBOTTOM RD  
City-St-Zip: ALTHA, FL 32421

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: JEMISON, DAVID A  
Address: 22417 NW WATSON RD.  
City-St-Zip: ALTHA, FL 32421

Title: D (X) Change ( ) Addition  
Name: BODIFORD, BLAKE  
Address: 14893 NW SAM DUNCAN RD.  
City-St-Zip: ALTHA, FL 32421

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: DAVID A. JEMISON

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04/29/2005

Electronic Signature of Signing Officer or Director

Date