2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000155411

Entity Name: INVERNESS AIR CONDITIONING & HEATING INC

FILED Jan 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4353 E KELLY CT 2710 N BUCKNELL TERR INVERNESS, FL 344531548 HERNANDO, FL 34442

Current Mailing Address: New Mailing Address:

4353 E KELLY CT 2710 N BUCKNELL TERR INVERNESS, FL 344531548 HERNANDO, FL 34442

FEI Number: 55-0854676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KEYTE, JOHN J
4353 E KELLY CT
INVERNESS, FL 344531548 US

KEYTE, JOHN J
2710 N BUCKNELL TERR
HERNANDO, FL 34442 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: JOHN J KEYTE 01/07/2005

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: KEYTE, JOHN J Name: KEYTE, JOHN J

 Name:
 KEYTE, JOHN J
 Name:
 KEYTE, JOHN J

 Address:
 4353 E KELLY CT
 Address:
 2710 N BUCKNELL TERR

City-St-Zip: INVERNESS, FL 344531548 City-St-Zip: HERNANDO, FL 34442

 $\label{eq:title:state} \mbox{Title:} \qquad \mbox{S,T} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{S,T} \qquad \mbox{(X) Change () Addition}$

 Name:
 KEYTE, BARBARA L
 Name:
 KEYTE, BARBARA L

 Address:
 4353 E KELLY CT
 Address:
 2710 N BUCKNELL TERR

 City-St-Zip:
 INVERNESS, FL 344531548
 City-St-Zip:
 HERNANDO, FL 34442

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

 Name:
 KEYTE, JAMÉS J
 Name:
 KEYTE, JAMÉS J

 Address:
 4353 E KELLY CT
 Address:
 2710 N BUCKNELL TERR

 City-St-Zip:
 INVERNESS, FL 344531548
 City-St-Zip:
 HERNANDO, FL 34442

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: BARBARA L KEYTE S,T 01/07/2005