

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023489

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: BOB HAWTHORNE AIR CONDITION SERVICES, INC.

## Current Principal Place of Business:

21358 SE 152ND LANE  
UMATILLA, FL 32784

## New Principal Place of Business:

## Current Mailing Address:

21358 SE 152ND LANE  
UMATILLA, FL 32784

## New Mailing Address:

FEI Number: 34-1976119

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HAWTHORNE, ROBERT  
21358 SE 152ND LANE  
UMATILLA, FL 32784 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HAWTHORNE, ROBERT  
Address: 21358 SE 152ND LANE  
City-St-Zip: UMATILLA, FL 32784

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: HAWTHORNE, KENNETH R  
Address: P O BOX 937  
City-St-Zip: MOUNT DORA, FL 32756

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KENNETH R HAWTHORNE

VP

01/11/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date