## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029229

Entity Name: ADVANCED AIR CARE INC.

**FILED** Mar 31, 2009 Secretary of State

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

1510 COMMERCIAL PARK DR SUITE 4 1421 COMMERCIAL PARK DR. LAKELAND, FL 33801

SUITE 6

LAKELAND, FL 33801

**Current Mailing Address: New Mailing Address:** 

1510 COMMERCIAL PARK DR SUITE 4 1421 COMMERCIAL PARK DRIVE LAKELAND, FL 33801 SUITE 6

LAKELAND, FL 33801 US

FEI Number: 16-1692331 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:

**ACTION ACCOUNTING & TAX OF FLA** 635 BREVARD AVE. COCOA, FL 329227807 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: **PSTD** (X) Change ( ) Addition

Name: COUDRY, JAMES C Name: COUDRY, JAMES C

1510 COMMERCIAL PARK DR SUITE 4 1421 COMMERCIAL PARK DRIVE #6 Address: Address:

City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33801 US

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: JAMES C COUDRY **PSTD** 03/31/2009