

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000035563

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** FRESH AIR COOLING, HEATING AND REFRIGERATION INC.

**Current Principal Place of Business:**

1090 INNOVATION AVENUE  
UNIT A126  
NORTH PORT, FL 34289 US

**New Principal Place of Business:**

4030 JOANN TERRACE  
NORTH PORT, FL 34286 US

**Current Mailing Address:**

4030 JOANN TERRACE  
NORTH PORT, FL 34286 US

**New Mailing Address:**

**FEI Number:** 20-0886073      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WILLIAMS, WILLIAM G  
4030 JOANN TERRACE  
NORTH PORT, FL 34286 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WILLIAMS, WILLIAM G  
**Address:** 4030 JOANN TERRACE  
**City-St-Zip:** NORTH PORT, FL 34286 US

**Title:** VP  
**Name:** WILLIAMS, DEBORAH A  
**Address:** 4030 JOANN TERRACE  
**City-St-Zip:** NORTH PORT, FL 34286 US

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM G WILLIAMS

P

04/20/2011

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

\_\_\_\_\_  
Date