## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000149618

Entity Name: ARCTIC AIR OF THE TREASURE COAST INC.

FILED Apr 22, 2005 Secretary of State

|  |  | _                            |   |  |  |
|--|--|------------------------------|---|--|--|
| Current P  | rincipal Place of B  | usiness:                     | New Principal Place                         | of Business:                                 |  |
|  | ABINGDON AVE<br>LUCIE, FL 34953  | US                           |   |  |  |
| Current N  | lailing Address:   |                              | New Mailing Address                         | <b>s:</b>                                    |  |
|  | ABINGDON AVE<br>LUCIE, FL 34953  | US                           |   |  |  |
| FEI Number   | : 11-3734127 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 Age |  |                              |   | f New Registered Agent:                      |  |
| 1157 SW  | JGLAS T SR.<br>ABINGDON AVE<br>LUCIE, FL 34953                                 | US                           |   |  |  |
|  | named entity submi<br>e of Florida.  | its this statement for the p | purpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATUI   | RE:  |                              |   |  |  |
|  | Electronic Sig   | nature of Registered Ag      | ent   | Date   |  |
| Election Ca  | mpaign Financing Trust   | t Fund Contribution ( ).     |   |  |  |
| OFFICERS AND DIRECTORS:  |  |                              | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | PRES ( ) Delete<br>BICE, DOUGLAS T SF<br>1157 SW ABINGDON<br>PORT ST LUCIE, FL | R<br>AVE                     | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | VP ( ) Delete<br>BICE, CAROLINE A<br>1157 SW ABINGDON<br>PORT ST LUCIE, FL:    | AVE                          | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

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: DOUGLAS T. BICE **PRES** 04/22/2005