

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000111116

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: LIBERTYAIR AIR CONDITIONING AND HEATING INC.

## Current Principal Place of Business:

197 SW 129TH TERRACE  
NEWBERRY, FL 32669 US

## New Principal Place of Business:

## Current Mailing Address:

12921 SW 1ST ROAD  
107-106  
NEWBERRY, FL 32669 US

## New Mailing Address:

FEI Number: 26-1219376 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERRARA, PHILIP  
197 SW 129TH TERRACE  
NEWBERRY, FL 32669 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: P ( ) Delete  
Name: FERRARA, PHILIP  
Address: 197 SW 129TH TERRACE  
City-St-Zip: NEWBERRY, FL 32669 US

Title: VP ( ) Delete  
Name: FERRARA, GINA  
Address: 197 SW 129TH TERRACE  
City-St-Zip: NEWBERRY, FL 32669 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GINA FERRARA

VP

03/24/2009

Electronic Signature of Signing Officer or Director

Date