2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000025329

Entity Name: AIR CONDITION PHYSICIAN, INC.

FILED Apr 12, 2011 Secretary of State

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

1783 BLUE OAK COURT 521 FLAGLER STREET DELAND, FL 32720 DELTONA, FL 32725

Current Mailing Address: New Mailing Address:

1783 BLUE OAK COURT 521 FLAGLER STREET DELAND, FL 32720 DELTONA, FL 32725

FEI Number: 26-4509563 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:

HAGAN, TIMOTHY J LUCAS, THOMAS A
1783 BLUE OAK COURT 521 FLAGLER STREET
DELAND, FL 32720 US DELTONA, FL 32725 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: THOMAS A. LUCAS 04/12/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: LUCAS, THOMAS A
Address: 521 FLAGLER STREET
City-St-Zip: DELTONA, FL 32725

Title: VP

Name: WETHINGTON, BRIAN K Address: 620 MARILEA COURT City-St-Zip: ORANGE CITY, FL 32763

Title: T

Name: LUCAS, THOMAS A Address: 521 FLAGER STREET City-St-Zip: DELTONA, FL 32725

Title: S

Name: LUCAS, THOMAS A Address: 521 FLAGER STREET City-St-Zip: DELTONA, FL 32725

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: THOMAS A. LUCAS PRES 04/12/2011