

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000063849

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** JOHN SHAFFER AIR CONDITIONING, INC.

**Current Principal Place of Business:**

3420 N. COURTENAY PKWY #117  
MERRITT ISLAND, FL 32953 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 540730  
MERRITT ISLAND, FL 32954 US

**New Mailing Address:**

5280 SAND LAKE DR.  
MELBOURNE, FL 32934 US

**FEI Number:** 27-3192353

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHAFFER, JOHN  
486 FALMOUTH AVE.  
MERRITT ISLAND, FL 32952 US

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

SHAFFER, JOHN  
5280 SAND LAKE DRIVE  
MELBOURNE, FL 32934 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:

04/26/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SHAFFER, JOHN  
Address: 5280 SAND LAKE DR  
City-St-Zip: MELBOURNE, FL 32934 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: WALTER JOHN SHAFFER

PRES

04/26/2012

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

\_\_\_\_\_  
Date