

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000072848

FILED  
Feb 20, 2011  
Secretary of State

**Entity Name:** KOALA-TY AIR & REFRIGERATION, INC.

**Current Principal Place of Business:**

5837 JACKSON LANE  
VENICE, FL 34293 US

**New Principal Place of Business:**

4195 TAMIAMI TRAIL S  
PMB 137  
VENICE, FL 34293 US

**Current Mailing Address:**

4195 TAMIAMI TRAIL S  
PMB 137  
VENICE, FL 34293 US

**New Mailing Address:**

5837 JACKSON LANE  
VENICE, FL 34293 US

**FEI Number:** 30-0646061

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUSS, BETTE  
5837 JACKSON LANE  
VENICE, FL 34293 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: PD  
Name: SMOTHERS, DONALD  
Address: 11195 SEABREEZE AVE  
City-St-Zip: PORT CHARLOTTE, FL 33981 US

Title: D  
Name: RUSS, BETTE  
Address: 5837 JACKSON LANE  
City-St-Zip: VENICE, FL 34293 US

Title: D  
Name: RUSS, GARLAND  
Address: 5837 JACKSON LANE  
City-St-Zip: VENICE, FL 34293 US

Title: D  
Name: SMOTHERS, RENEE  
Address: 11195 SEABREEZE AVE  
City-St-Zip: PORT CHARLOTTE, FL 33981 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: BETTE RUSS

D

02/20/2011

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

\_\_\_\_\_  
Date