

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90286 046 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P94000003372		
1. Entity Name AIR TECHNOLOGY OF NORTH EAST FLORIDA INC.		
Principal Place of Business 1014 BLANDING BLVD. ORANGE PARK, FL 32065 US		Mailing Address 1014 BLANDING BLVD. ORANGE PARK, FL 32065 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PRUDHOMME, BRENDA G 1485 KATHLEEN WAY GREEN COVE SPRINGS, FL 32043		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Fee/notice required when re-registering) DATE _____		
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PRUDHOMME, BRENDA G 1485 KATHLEEN WAY GREEN COVE SPRINGS, FL 32043	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PRUDHOMME, RON 1485 KATHLEEN WAY GREEN COVE SPRINGS, FL 32043	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Brenda Gail Prudhomme</u> BRENDA GAIL PRUDHOMME 5-4-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

40087328



05032006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3216179

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

904-276-8100