

# 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000014511

FILED  
Aug 26, 2005  
Secretary of State

Entity Name: J AND R CUSTOM AIR SYSTEMS, INC.

**Current Principal Place of Business:**

106 S SILVER CLUSTER COURT  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

106 S SILVER CLUSTER COURT  
LONGWOOD, FL 32750

**New Mailing Address:**

FEI Number: 59-3362462

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAMRICK, RUSSELL  
106 S SILVER CLUSTER COURT  
LONGWOOD, FL 32750 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 ( ) Delete  
Name: HAMRICK, RUSSELL  
Address: 106 S SILVER CLUSTER COURT  
City-St-Zip: LONGWOOD, FL 32750 US

Title: V ( ) Delete  
Name: HOWARD, KEITH Z  
Address: 1008 HARTFORD DRIVE  
City-St-Zip: DELAND, FL 32724 US

Title: ST ( ) Delete  
Name: SHAUT, DAVID A  
Address: 6204 HIGHLAND AVE.  
City-St-Zip: LEESBURG, FL 34748 US

Title: T ( ) Delete  
Name: HAMANN, ERIC  
Address: 358 W. DECARLO DRIVE  
City-St-Zip: DELTONA, FL 32725 US

Title: COMP (X) Delete  
Name: JERRY, VAN DAM COMP  
Address: 106 S. SILVERCLUSTER CT  
City-St-Zip: LONGWOOD, FL 32750 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: RUSSELL S.HAMRICK

PD

08/26/2005

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

\_\_\_\_\_  
Date