2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2007
Secretary of State

DOCUMENT# P96000038645

Entity Name: OWENS AIR, CONDITIONING & HEATING INC

Current Principal Place of Business:

5837 TURKEY TREE LN
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

PO BOX 2012
SEFFNER, FL 33583

New Mailing Address:

FEI Number: 59-3377983 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OWENS, BRENDA
5837 TURKEY TREE LN
PLANT CITY, FL 33567 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: OWENS, VICTOR
Address: 5837 TURKEY TREE LN
City-St-Zip: PLANT CITY, FL 33567

Title: TVP ( ) Delete
Name: OWENS, BRENDA G
Address: 5837 TURKEY TREE LN
City-St-Zip: PLANT CITY, FL 33567

Title: T ( ) Delete
Name: OWENS, DAVID V
Address: 5837 TURKEY TREE LN
City-St-Zip: PLANT CITY, FL 33567

Title: S ( ) Delete
Name: OWENS, BRIAN C
Address: 5837 TURKEY TREE LN
City-St-Zip: PLANT CITY, FL 33567

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: OWENS, BRENDA G
Address: 5837 TURKEY TREE LN
City-St-Zip: PLANT CITY, FL 33567

Title: S (X) Change ( ) Addition
Name: OWENS, BRENDA G
Address: 5837 TURKEY TREE LN
City-St-Zip: PLANT CITY, FL 33567

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BRENDA G. OWENS V.P. 04/28/2007

Electronic Signature of Signing Officer or Director — Date