

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076467

FILED
Apr 10, 2009
Secretary of State

Entity Name: LEMERISE COOLING & HEATING, INC.

Current Principal Place of Business:

6115 N ATLANTIC AVE
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

6115 N ATLANTIC AVE
DOWN
CAPE CANAVERAL, FL 32920 US

Current Mailing Address:

6115 N. ATLANTIC AVE.
CAPE CANAVERAL, FL 32920

New Mailing Address:

6115 N. ATLANTIC AVE.
DOWN
CAPE CANAVERAL, FL 32920

FEI Number: 59-3467137

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMERISE, AURELIA A
8722 LANTANA COURT
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

LEMERISE, AURELIA A
6115 N. ATLANTIC AVE.
DOWN
CAPE CANAVERAL, FL 32920 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:

04/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEMERISE, AURELIA A
Address: 8722 LANTANA COURT
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: V () Delete
Name: LEMERISE, HENRY A.
Address: 8722 LANTANA COURT
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEMERISE, AURELIA A
Address: 6115 N. ATLANTIC AVE.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: V (X) Change () Addition
Name: LEMERISE, HENRY . A
Address: 6115 N. ATLANTIC AVE.
City-St-Zip: CAPE CANAVERAL, FL 32920

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: AURELIA A. LEMERISE

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

Date