

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000002163

FILED
Apr 02, 2007
Secretary of State

Entity Name: NORTH AMERICAN REFRIGERATION SERVICES, INC.

Current Principal Place of Business:

526 STOCKTON STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

526 STOCKTON STREET
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number: 59-3550438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLBROOK, A. LEON III
ONE INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE, FL 322025059 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: AT () Delete
Name: WELBORN, FRANK
Address: 526 STACKTON STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: VP () Delete
Name: HOVSER, FRANK
Address: 526 STACKTON STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: T () Delete
Name: ORTEGAS, VERNON
Address: 526 STOCKTON STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: S () Delete
Name: PLATT, LEWIS
Address: 526 STACKTON STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: P () Delete
Name: MILLER, JOHN B III
Address: 526 STACKTON STREET
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AT (X) Change () Addition
Name: WELBORN, FRANK
Address: 526 STOCKTON STREET
City-St-Zip: JACKSONVILLE, FL 32204

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 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: JOHN B. MILLER III

P

04/02/2007

Electronic Signature of Signing Officer or Director

Date