## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000002163

Entity Name: NORTH AMERICAN REFRIGERATION SERVICES, INC.

FILED Apr 16, 2008 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
	KTON STREE IVILLE, FL 322			
Current Mailing Address:			New Mailing Address:	
	KTON STREE IVILLE, FL 322			
FEI Number	: 59-3550438	FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired ( )
Name and	d Address of C	Surrent Registered Agent:	Name and	Address of New Registered Agent:
ONE INDE	DK, A. LEON II EPENDENT DR )1 IVILLE, FL 322	RIVE		
The above in the State	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,
SIGNATUI	RE:			
	Electron	ic Signature of Registered Age	ent	Date
Election Car	mpaign Financing	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	AT () WELBORN, FR 526 STOCKTON JACKSONVILLE	N STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () HOVSER, FRAN 526 STACKTON JACKSONVILLE	STREET	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition HOUSER, FRANK 526 STOCKTON STREET JACKSONVILLE, FL 32204
Title: Name: Address: City-St-Zip:	T () ORTEGAS, VEF 526 STOCKTON JACKSONVILLE	N STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	S () PLATT, LEWIS 526 STACKTON JACKSONVILLE		Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition PLATT, LEWIS 526 STOCKTON STREET JACKSONVILLE, FL 32204
Title: Name: Address: City-St-Zip:	P () MILLER, JOHN 526 STACKTON JACKSONVILLE	STREET	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition MILLER, JOHN B III 526 STOCKTON STREET JACKSONVILLE, FL 32204

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: JOHN B. MILLER PRES 04/16/2008