

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000017162

FILED
Apr 18, 2009
Secretary of State

Entity Name: JEFECO AIR CONDITIONING AND REFRIGERATION INC.

Current Principal Place of Business:

136 S. BLUE HERON RD.
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

223 PISCES DR
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

136 S. BLUE HERON RD.
SANTA ROSA BEACH, FL 32459

New Mailing Address:

223 PISCES DR
SANTA ROSA BEACH, FL 32459

FEI Number: 59-3568295

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWEN, JEFFREY D
136 S. BLUE HERON RD.
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

BOWEN, JEFFREY D
223 PISCES DR
SANTA ROSA BEACH, FL 32459 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:

04/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOWEN, JEFF
Address: 136 S. BLUE HERON RD.
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T () Delete
Name: BOWEN, CONNIE
Address: 136 S. BLU HERON RD.
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOWEN, JEFF
Address: 223 PISCES DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T (X) Change () Addition
Name: BOWEN, CONNIE
Address: 223 PISCES DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: JEFFREY D. BOWEN

P

04/18/2009

Electronic Signature of Signing Officer or Director

Date