## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000025857

923 SENECA TRAIL

ST. CLOUD, FL 34772

Address: City-St-Zip:

Entity Name: SMITH'S AIRCONDITIONING & ELECTRIC, INC.

FILED Mar 26, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	ONEGAN AVEN E, FL 34744	UE			
Current Mailing Address:			New Mailing Address:		
1146 E DONEGAN KISSIMMEE, FL 34744			1146 E DONEGAN AVENUE KISSIMMEE, FL 34744		
FEI Number	: 59-3568175	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1146 E. D	TOBIAS H ONEGAN AVEN EE, FL 34744	NUE US			
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () WETZEL, TOBIA 1120 CREEKVII ST. CLOUD, FL	EW COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () WETZEL, ANN I 1120 CREEKVII ST. CLOUD, FL	EW COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D () WETZEL, WILL	Delete IAM L	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ANN M WETZEL TRES 03/26/2009