

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S22758

FILED
Apr 22, 2009
Secretary of State

Entity Name: ANGER'S AIR CONDITIONING, INC.

Current Principal Place of Business:

2050 N.W. 1ST AVENUE
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

2050 N.W. 1ST AVENUE
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: 65-0234179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGER, HAROLD R
2050 N.W. 1ST AVENUE
POMPANO BEACH, FL 330604910 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: VP () Delete
Name: ANGER, DAVID
Address: 2050 N.W. 1ST AVE.
City-St-Zip: POMPANO BEACH, FL

Title: PST () Delete
Name: ANGER, CYNTHIA A
Address: 2050 NW 1ST AVE
City-St-Zip: POMPANO BEACH, FL

Title: AVP () Delete
Name: ANGER, HAROLD R
Address: 2050 NW 1ST AVE
City-St-Zip: POMPANO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ANGER, DAVID
Address: 2050 N.W. 1ST AVE.
City-St-Zip: POMPANO BEACH, FL 33060

Title: PST (X) Change () Addition
Name: ANGER, CYNTHIA A
Address: 2050 NW 1ST AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: AVP (X) Change () Addition
Name: ANGER, HAROLD R
Address: 2050 NW 1ST AVE
City-St-Zip: POMPANO BEACH, FL 33060

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: CYNTHIA A ANGER

Electronic Signature of Signing Officer or Director

PRES

04/22/2009

_____ Date