

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # V11984

1. Entity Name
ROY NELSON AIR CONDITIONING COMPANY



Principal Place of Business
**10466 TRAILWOOD CIRCLE
JUPITER, FL 33478 US**

Mailing Address
**10466 TRAILWOOD CIRCLE
JUPITER, FL 33478 US**



01302008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0310048	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**NELSON, ROY G.
10466 TRAILWOOD CIRCLE
JUPITER, FL 33478**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Roy G. Nelson*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

Feb 29, 08
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

000000844736
03/13/08-80011-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NELSON, ROY G
STREET ADDRESS	10466 TRAILWOOD CIRCLE
CITY-ST-ZIP	JUPITER, FL

TITLE	V
NAME	NELSON, ROY G
STREET ADDRESS	10466 TRAILWOOD CIRCLE
CITY-ST-ZIP	JUPITER, FL

TITLE	S
NAME	NELSON, SARAH S
STREET ADDRESS	10466 TRAILWOOD CIRCLE
CITY-ST-ZIP	JUPITER, FL

TITLE	T
NAME	NELSON, SARAH S
STREET ADDRESS	10466 TRAILWOOD CIRCLE
CITY-ST-ZIP	JUPITER, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Roy G. Nelson* *Roy G. Nelson* *2/29/08*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #