

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V34344

FILED  
Apr 18, 2007  
Secretary of State

Entity Name: MORRIS AIR CONDITIONING & HEATING, INC.

**Current Principal Place of Business:**

1501 ALDER WAY  
BRANDON, FL 33510 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 1427  
MANGO, FL 33550 US

**New Mailing Address:**

FEI Number: 59-3125396      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MORRIS, JAMES D  
1501 ALDER WAY  
BRANDON, FL 33510 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: PD ( ) Delete  
Name: MORRIS, JAMES D,  
Address: 1501 ALDER WAY  
City-St-Zip: BRANDON, FL

Title: VP ( ) Delete  
Name: WEST, JOHNNY M  
Address: 38939 TALL DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: V ( ) Delete  
Name: MORRIS, J. R  
Address: 2115 DEKLE AVE, NO B-3  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: MORRIS, J. R  
Address: 2215 BODRICK CIRCLE, APT 301  
City-St-Zip: BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES D. MORRIS

PD

04/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date