

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000112775

FILED
Apr 15, 2009
Secretary of State

Entity Name: CLEANAIRE, INC.

Current Principal Place of Business:

12740 KENAN DRIVE
BLDG. 200, SUITE 100
JACKSONVILLE, FL 32258 US

New Principal Place of Business:

Current Mailing Address:

12740 KENAN DRIVE
BLDG. 200, SUITE 100
JACKSONVILLE, FL 32258 US

New Mailing Address:

FEI Number: 26-1241819 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, BOWLUS, DUSS, MORGAN, KENNEY, SAFER
10110 SAN JOSE BLVD
JACKSONVILLE, FL 32257 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: P () Delete
Name: HUMPHREY, CATHERINE
Address: 1052 HOLLY OAK COURT
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: VP () Delete
Name: MORRIS, MITCHELL M
Address: 2532 STAPLEFORD LANE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: T () Delete
Name: LEE, HOWARD T
Address: 1216 PALM DRIVE
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: D () Delete
Name: DAVIS, BRANDON
Address: 12477 WINDY WILLOWS RD. N.
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: LEE, HOWARD T
Address: 1216 PALM DRIVE
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: VP (X) Change () Addition
Name: DAVIS, BRANDON
Address: 12477 WINDY WILLOWS RD. N.
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: CFO () Change (X) Addition
Name: HUMPHREY, CURTIS J
Address: 1052 HOLLY OAKS COURT
City-St-Zip: JACKSONVILLE, FL 32259

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: CATHERINE R. HUMPHREY

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date