

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000121975

Entity Name: CITY & COUNTY AIR CONDITIONING INC

Current Principal Place of Business:

5220 NW NORTH LOVOY CIRCLE
PORT SAINT LUCIE, FL 34986

Current Mailing Address:

5220 NW NORTH LOVOY CIRCLE
PORT SAINT LUCIE, FL 34986

FEI Number: 20-0358808

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YUN, KUM Y
5220 NW NORTH LOVOY CIRCLE
PORT SAINT LUCIE, FL 34986 US

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

Officer/Director Detail :

Title	P	Title	V
Name	YUN, KUM Y	Name	YUN, YUN M
Address	5220 NW NORTH LOVOY CIRCLE	Address	5220 NW NORTH LOVOY CIRCLE
City-State-Zip:	PORT SAINT LUCIE FL 34986	City-State-Zip:	PORT SAINT LUCIE FL 34986

I hereby 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 all other like empowered.

SIGNATURE: KUM Y YUN

PRESIDENT

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date