FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H81765

(0)

RIDGE HEATING & AIR CONDITIONING, INC.

Mading Address

FILED
May 07 1998 8:00am
Secretary of State



C/O JOEL B. RIDGE 1319 HWY. 390 PANAMA CITY FL 32405		C/O JOEL B. RIDGE 1319 HWY. 390 PANAMA CITY FL 32405		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
				10/18/1985		
	lace of Business	2a. Mailing Address	4 01	4. FEI Number	Applied For	
21 1319 9	St. Andrew Blvd.	26 1319 St. An	drew Blvd	59-2624208	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	na City, FL	City & State Panama G	ty, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
21p 24 3240			Bay	R. This corporation owes or has paid the Personal Property Tax due June 30. Name and Address of New Register:	Yes No	
9. Name and Address of Current Registered Agent 81 Name						
RIDGE, JOEL B.				SAME		
1319 HWY. 390 PANAMA CITY FL 32405			82 Street A 83	ddress (P.O. Box Number, is Not Acceptable) 19 St. Andrew Blue	d	
			24 05		AF Zin Codo	
84 City SAM				AME F	L 85 Zip Code SAME	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature Signa						
12.	Signature, typest or protect name of regulators agent. OFFICERS AND		Registered Agent signature re	ADDITIONS/CHANGES TO OFFICERS A	<u>-</u>	
TITLE	DP	DELETE	+		1.120	
NAME	RIDGE, JOEL B.		1 2 NAME	1319 St. Andrew B Panama City, FL 3	. ,	
STREET ADDRESS	1319 HWY 390		1.3 STREET ADDRESS	1319 St. Andrew B	lvd.	
CITY-ST-ZIP	PANAMA CITY FL		1.4 CITY-ST-ZIP	Panama City, FL 3	32405	
TITLE		DELETE	2 1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY+ST-ZIP			
TITLE	_	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		Donette	3.4. CITY - ST - ZIP		Change Addition	
TITLE		L DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CHY-ST-ZIP		DELETE	4.4 CITY - ST - ZIF 5.1 TITLE		Change Addition	
TITLE		ניין מנכנונ	5.2 NAME		C coming C reserven	
NAME CYDECT ADDRESS			5.3 STREET ADDRESS			
STREET ADDRESS			5.4 CITY - ST - ZIP			
CITY-ST-ZIP TITLE		DELETE	6.1 HTLE		Change Addition	
NAME		Par Decree	6.2 NAME		- · - ·	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. I hereby o	certify that the information supplied wit	h this filing does not qualify for	the exemption stated	in Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the information	

indicated on this annual report or supplemental arminal teaching 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 12 or Block 13 if changed, or on an attachment with an address.