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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

ncipal Place	HEATING & AIR, INC. or of Business Win Lane A FL 32526-4029	Mailing Address 3079 GODWIN (
US	A FL 32526-4029	PENSACOLA FL US	32526-4029		Date Incorporated or Qualifie	d 3a . Date of La	ast Report
·					10/10/1986		1/1995
Principal Pi	ace of Business	2a. Mailing Address	i		4. FEI Number		Applied For
Suite, Ant.	#, elc.				74-2452659		Not Applicat
		27	O.		5. Certificate of Status Desired		.75 Additional
City & State	3	City & State			6. Election Campaign Financing		5.00 May Be
		28			Trust Fund Contribution	[] Y	dded to Fees
Ζιρ	Country 25	Zip 29	Coul	ntry	8. This corporation has liability for	or intangible tax und	ers 199.032,
	9. Name and Address of Curr	rent Registered Agent	30		Florida Statutes Y Y 10. Name and Address of New	∕es □No	
				81 Name	10. Hame and Address of New	Registered Agent	
ARD, DARRYL H 3079 GODWIN LANE			}	82 Street Add	tross (P.O. Boy Number is Not Assess		
					Street Address (P.O. Box Number is Not Acceptable)		
PENSA	COLA FL 32526			83			
				84 City		FL 85	Zip Code
	ed agent, or both, in the State of Flo th, and accept the obligations of, Se	orida. Such change was aut ection 607.0505, Florida Sta	norized by the o tutes.	ve-named corpor orporation's boa	oration submits this statement for the pard of directors. I hereby accept the ap	ourpose of changing opointment as registe	its registered off ered agent. I am
NATURE .	Signature, typed or printed name of registered agr	ent and title it approable	(NOTE: Registered /	Agent signature require		DATE	
NATURE .	Signature, Special or princed name of registered ap- OFFICERS A PD	ent and title it approable	(NOTE Registered)	Agent signature require	ed when reinstating)	DATE	CTORS IN 12
NATURE .	Signature, typed or printed name of registered agr	ent and title it approable	(NOTE Registered / 13. 1.1 TH 1.2 NAI	Agent signature require TLE ME	ed when reinstating)	DATE FFICERS AND DIRE	CTORS IN 12
NATURE _	Sgnatice, filed or princid name of registered ay OFFICERS A PD ARD, DARRYL H	ent and title it approable	(NOTE Registered / 13. 1.1 III 1.2 NAI 1.3 STE	Agent signature require ILF ME HEET ADDRESS	ed when reinstating)	DATE FFICERS AND DIRE	CTORS IN 12
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