

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 26 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L38238 (6)

1. Corporation Name

"DEE'S" CUSTOM HEATING & AIR CONDITIONING, INC.

Principal Place of Business

22101 U.S. 19 NORTH
CLEARWATER FL 34625

Mailing Address

22101 U.S. 19 NORTH
CLEARWATER FL 34625

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/26/1989

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21 2112-K Sunnydale Blvd

2a. Mailing Address

26 2112-K Sunnydale Blvd.

4. FEI Number

59-3002036

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Clearwater, Florida

City & State

28 Clearwater, Florida

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 34625

City

25 Pinellas

Zip

29 34625

City

30 Pinellas

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HERBERT GOFORTH
22101 U.S. 19, NORTH
CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name Herbert Goforth

82 Street Address P.O. Box Number is Not Acceptable
2112-K Sunnydale Blvd.

83

84 City Clearwater

FL

85 Zip Code 34625

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, typed or printed name of registered agent and the corporation

Herbert Goforth, President

DATE

4/21/95

12. OFFICERS AND DIRECTORS

TITLE DPS
NAME GOFORTH, HERBERT DEE
STREET ADDRESS 22101 U.S. HWY. 19 NORTH
CITY-ST-ZIP CLEARWATER FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director, Pres, Sec'y, Treas ☒ Change ☐ Addition
1.2 NAME Goforth, Herbert Dee
1.3 STREET ADDRESS 2112-K Sunnydale Blvd.
1.4 CITY-ST-ZIP Clearwater, FL 34625

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 of this report, or on an attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Herbert Goforth, President

4/21/95

813-446-2699