## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE

**CORPORATION** ANNUAL REPORT

1998

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

## **FILED** May 06 1998 8:00am Secretary of State

DOC'S HEATING & AIR CONDITIONING, INC. Principal Place of Business Mailing Address P.O. BOX 607 PITTSBURG KS 66762 P.O. BOX 607 PITTSBURG KS 66762 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 08/07/1991 4. FEI Number 2. Principal Place of Business 2a, Mailing Address Applied For 48-0819378 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc 6. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible Yes 29 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BERG, SKIP SUITE D 82 Street Address (P.O. Box Number is Not Acceptable) 1872 TAMIAMI TRAIL 83 **VENICE FL 34283** Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change \_\_\_ Addition TITLE 11TITLE CROZIER, VERNON V. 1.2 NAME NAME **RT 5 BOX 56** 1.3 STREET ADDRESS STREET ADDRESS PITTSUBRG KS 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE VC 2.1 TITLE TITLE CROZIER, VERNON V 2.2 NAME NAME **ROUTE 5 BOX 56** 2.3 STREET ADDRESS STREET ADDRESS PITTSBURG KS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE CROZIER, VERNON V 3.2 NAME NAME **ROUTE 5 BOX 56** 3.3 STREET ADDRESS STREET ADDRESS PITTSBURG KS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change DELFTE Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TITLE TITLE 52 NAME NAME **5 3 STREET ADDRESS** STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 if changed, or on an attachment with an address.

4/28/98