

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

FILED

Apr 21 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000040563 (4)

1. Corporation Name  
ARMSTRONG AIR CONDITION & HEATING OF CENTRAL FLO  
RIDA, INC.



Principal Place of Business  
364 W. STORY ROAD  
OCOE FL 34761

Mailing Address  
364 W. STORY ROAD  
OCOE FL 34761-3006

3. Date Incorporated or Qualified  
05/13/1996

3a. Date of Last Report

2. Principal Place of Business

21 312 Maguire Rd.  
Suite Apt. #, etc.

22 City & State  
Ocoee, FL-34761

23 Zip Country  
34761 USA

2a. Mailing Address

26 312 Maguire Rd.  
Suite Apt. #, etc.

27 City & State  
Ocoee, FL

28 Zip Country  
34761 USA

4. FEI Number  
59-3374032

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
BRITTON, CATHI A  
364 W. STORY ROAD  
OCOE FL 34761

10. Name and Address of New Registered Agent

81 Name  
PAUL L RICHARDS

82 Street Address (P.O. Box Number is Not Acceptable)  
312 MAGUIRE RD EXT

83

84 City  
OCOE

FL 85 Zip Code  
34761

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: *Paul Richards* PAUL RICHARDS PRESIDENT 4-10-97  
Date

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RICHARDS, PAUL	
STREET ADDRESS	217 KILLINGTON STREET	
CITY-ST-ZIP	ORLANDO FL 32829	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BRITTON, RANDY	
STREET ADDRESS	13244 LAKE BUTLER COURT	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	BRITTON, CATHI A	
STREET ADDRESS	364 W. STORY ROAD	
CITY-ST-ZIP	OCOE FL 34761	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby 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 in an attachment with an address.

SIGNATURE: *Paul Richards* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4-10-97 407325-2740  
Date Daytime Phone #

CR2E034 (9/96)