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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000022458 (8)

ARCTIC AIR OF DESOTO, INC.

ARCADIA FL 34266

CITY-ST-ZIP

Principal Place of Business Mailing Address 1576 N.W. PINE CREEK AVENUE 1576 N.W. PINE CREEK AVENUE ARÇADIA FL 34266 ARCADIA FL 34266 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>03/12/1997</u> Applied For 2. Principal Place of Business 2a. Mailing Address 59-3435046 Not Applicable \$8.75 Additional Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 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 Personal Property Tax due June 30. ☐ Yes 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name WALDRON, JR., EUGENE E ESQ. 124 NORTH BREVARD AVENUE

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.

83

Street Address (P.O. Box Number is Not Acceptable)

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Stgrature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE ELLERBEE, KATHLEEN A 1.2 NAME NAME 1576 N.W. PINE CREEK AVENUE 1.3 STREET ADDRESS STREET ADDRESS **ARCADIA FL 34266** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **ELLERBEE. DONALD D** NAME 2 2 NAME 1576 N.W. PINE CREEK AVENUE STREET ADDRESS 2.3 STREET ADDRESS ARCADIA FL 34266 2 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 

14. I 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 on all attaurment with an address.

6.4 CITY - ST - ZIP

1-941-941-0210

**FILED** 

Apr 27 1998 8:00am

Secretary of State

Zip Code