

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004924

**FILED**  
**Feb 11, 2008**  
**Secretary of State**

**Entity Name:** BAYSIDE HEATING & AIR CONDITIONING, INC.

**Current Principal Place of Business:**

22085 US HWY 19  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

**Current Mailing Address:**

22085 US HWY 19  
CLEARWATER, FL 33765 US

**New Mailing Address:**

**FEI Number:** 59-3491187      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHEATHAM, RUSSELL  
5536 CENTRALA AVE  
SAINT PETERSBURG, FL 33707 US

**Name and Address of New Registered Agent:**

RESIDENT AGENT CORPORATION OF PINELLAS CO.  
980 TYRONE BLVD.  
SAINT PETERSBURG, FL 33710 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RESIDENT AGENT CORPORATION OF PINELLAS CO.      02/11/2008  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PROVATAS, TOM  
Address: 2142 FLAMEFLOWER CT  
City-St-Zip: TRINITY, FL 34655

Title: VD ( ) Delete  
Name: ROBINSON, GARY W  
Address: 3120 PARK STREET, NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY ROBINSON      D      02/11/2008  
Electronic Signature of Signing Officer or Director      Date