## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** 

S88238

1. Entity Name SHAFFER AIR CONDITIONING AND REFRIGERATION SERVI CES. INC.

020,0.		•	Ì	GOD WE THE				
Principal Place of Business 12488 KIRBY SMITH RD. ORLANDO FL 32832 US		Mailing Address P. O. BOX 720478 ORLANDO FL 32872						
		US			1 1081/1010 101 1910: LOIND 14000 1119/1010 0011 0011 01011 01011 01011 01011			
2. Principal Place of Business		3. Mailing Address					AII AIBII IDDI	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-3095058			pplied For ot Applicable
Zìp	Country Zip _		Country	* <del>-</del>	- 5. Certificate of Status Desired S8.75 Additional Fee Required			ditiona! ed
6. Na	ame and Address of Currer	nt Registered Agent	gistered Agent		7. Name and Address of New Registered Agent			
				Name				
SHAFFER, CARL E 12488 KIRBY SMIT			Street Address		(P.O. Box Number is Not Acceptable)			
ORLANDO FL 3283								
				City	· · · · · · · · · · · · · · · · · · ·	FL	Zip Cod	le
the obligations of re	gistered agent.		s registered	office or registe	red agent, or both, in the State of F	lorida. I am fa	amiliar with,	and accept
Signature, ty	yped or printed name of registered agei	nt and title if applicable. (NOT	TE: Registered Ag	gent signature requires	d when reinstating)	DATE		
After May 1,	W!!! FEE IS \$150.00 2003 Fee will be \$550.00 e to Florida Department		*	<u>-</u>	9. Election Campaign F Trust Fund Contribut			00 May Be d to Fees
10.	OFFICERS AN	D DIRECTORS	11.		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11
TITLE P		☐ Delete	TITLE				Change	Addition
	R, CARL E		NAME					
STREET ADDRESS 12488 K	(IRBY SMITH RD.		STREET A	1				
——				- ZIF				
	BRADFORD J	☐ Delete	, TITLE NAME				☐ Change	Addition
	EW JERSEY AVE.		STREET A	ADDRESS				
	SPRINGS FL 32130	الم المنطقة المنافعة	CITY-ST	ZIP	والمستوميون والمستوم الاراسيس			<b>~</b> ;
TITLE ST		☐ Delete	TITLE				☐ Change	Addition
NAME SHAFFE	R, DONNA M		NAME					
STREET ADDRESS 12488 K	Kirby Smith RD. Do Fl 32832		STREET A	- 1				
	JU TL 32032		CITY-ST	- 217				
TITLE NAME		☐ Delete	TITLE NAME				☐ Change	Addition
STREET ADDRESS			NAME STREET A	ADDRESS				
CITY-ST-ZIP			CITY-ST-	1	•			
TITLE		☐ Delete	TITLE			<del></del>	☐ Change	Addition
NAME			NAME					
STREET ADDRESS			STREET A	DDRESS				

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

407-384-7902

☐ Change

☐ Addition

**FILED** 

Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90650 045 \*\*\*150.00