

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J85310

1. Entity Name
SOUTHLAND HEATING & COOLING, INC.

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90347 018 ***150.00

Principal Place of Business
7644 62 ST N
PINELLAS PARK FL 33781

Mailing Address
7644 62 ST N
PINELLAS PARK FL 33781



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2837994**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KRIETER, KEVIN R.
10758 109TH WAY
SEMINOLE FL 34648

Name **KRIETER, CHRISTIAN M. JR**
Street Address (P.O. Box Number is Not Acceptable)
7644 62 ST N
City **PINELLAS PARK** FL Zip Code **33781**

8. 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 *Christian M. Krieter Jr.*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **2/23/01**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME KRIETER, CHRISTIAN M.
STREET ADDRESS 7644 62ND ST N
CITY-ST-ZIP PINELLAS PARK FL ☐ Delete

TITLE D
NAME KRIETER, KEVIN R.
STREET ADDRESS 10758 109TH WAY
CITY-ST-ZIP SEMINOLE FL ☒ Delete

TITLE V
NAME KRIETER, SANDRA
STREET ADDRESS 7644 62ND ST. N.
CITY-ST-ZIP PINELLAS PARK FL ☐ Delete

TITLE V
NAME KRIETER, DEBBIE
STREET ADDRESS 10758 109TH WAY
CITY-ST-ZIP SEMINOLE FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Christian M. Krieter Jr. PRESIDENT 2/23/01 (727) 397-7901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)