

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M98561

FILED
Jan 17, 2014
Secretary of State
CC3520808613

Entity Name: CLIMATE MASTERS HEATING & AIR CONDITIONING, INC.

Current Principal Place of Business:

5275 U.S. HIGHWAY 1 SOUTH
ST. AUGUSTINE, FL 32086

Current Mailing Address:

5275 U.S. HIGHWAY 1 SOUTH
ST. AUGUSTINE, FL 32086

FEI Number: 59-2905342

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHULER, GREGORY MPTD
5275 U. S. HIGHWAY 1 SOUTH
SAINT AUGUSTINE, FL 32086 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PTD
Name SCHULER, GREGORY M.
Address 1078 CHEYENNE DR.
City-State-Zip: ST. AUGUSTINE FL 32086

Title VPD
Name SCHULER, DEBBIE
Address 1078 CHEYENNE DRIVE
City-State-Zip: SAINT AUGUSTINE FL 32086

Title TD
Name BAILEY, KELLY M
Address 103 SAN JOSE BLVD
City-State-Zip: SAINT AUGUSTINE FL 32086

Title OD
Name KENTON, LEWIS R
Address 3175 U.S. 1 SOUTH
City-State-Zip: SAINT AUGUSTINE FL 32086

Title OD
Name SCHULER, JESSICA
Address 1078 CHEYENNE DRIVE
City-State-Zip: SAINT AUGUSTINE FL 32086

Title OD
Name SCHULER, STEFAN
Address 1078 CHEYENNE DRIVE
City-State-Zip: SAINT AUGUSTINE FL 32086

I hereby 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 all other like empowered.

SIGNATURE: KELLY BAILEY

TREASURER/DIRECTOR

01/17/2014

Electronic Signature of Signing Officer/Director Detail

Date