FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

365774 DOCUMENT #

1. Corporation Name

(9)

COMMUNITY COOLING & HEATING, INC.

Principal Place of Business	Mailing Address	
5876 PARK ROAD S.W.	5976 PARK ROAD S.W. FORT MYERS EL 33908	

FORT MYERS	FL 33908	FORT MIERS PL 339	Ve .					
						3. Date Incorporated or Qualified 06/16/1970	3a. Date of Li 04/19	ast Report / 1995
2. Principal Pla	ce of Business	2a. Mailing Address			A 1.4-1-1-1	4. FEI Number 59-1295519	-	Applied For Not Applicab
21		26					C 1	3.75 Additional
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				Certificate of Status Desired	1 1 7	Fee Required
City & State		27 City & State		6. Election Campaign Financing	\$	5.00 May Be		
City & State		28				Trust Fund Contribution	1 1 7	Added to Fees
<i>Z</i> ip	Country	Zip	T Co	untry		8. This corporation has liability for	ntangible tax un	ders 199.032,
<u>2</u> ηρ	25	29	30	,		Florida Statutes		
1	9. Name and Address of Currer			1		10. Name and Address of New R	egistered Ager	it
				81	Name			
HARTMA	INN, PAUL			82	C+	ress (P.O. Box Number is Not Acceptab	101	
	RK ROAD S.W.			62	Street Addr	ress (F.O. DOX Number is not Acceptac	10)	
	RS FL 33908			83				
1 1. 11.12								7-0-4-
				84	City		FL 85	Zip Code
44.5	607.0500	and 607 1509 Florida State	tos the at	J	L	oration submits this statement for the pul and of directors. I hereby accept the app	pose of changin	a its reaistered of
CICNATURE	h, and accept the obligations of, Sect			ed Age	તી કહ્યુંગઢકાર ભાગા મ	ed when reinstating)	DATE	
12.		D DIRECTORS	13			ADDITIONS/CHANGES TO OFF		
TITLE	PO	DELETE	1.1	THLE			☐ Cr	nange 🔲 Addit:o
NAME	HARTMANN,PAUL		1.2	NAME				
STREET ADDRESS	5876 PARK ROAD S.W.		1.3	STREET	L ADDRESS			
CITY-ST-ZIP	FT MYERS FL		1 4	CHY-S	ST-ZIP			
TITLE	SD	☐ DELETE	2 1	TITLE			☐ C	nange 🔲 Additio
NAME	HARTMANN, ADRIENNE		2.2	NAME				
STREET ADDRESS	5876 PARK ROAD S.W.		2.3	STREE	1 ADORESS			
CITY-ST-2IF	FT MYERS FL		2.4	CITY -	ST-ZIP			
TITLE	D	☐ DELETE	3	TILE				nange 🔲 Additio
NAME	HARTMANN, ADRIENNE		32	NAMÉ				
STREET ADDRESS	5876 PARK ROAD S.W.		3 3	STREE	EF ADDRESS			
CITY-ST-ZIF	FT MYERS FL		3.4	CITY	ST-ZIP			
TITLÉ	VP	DELETE	4	TITLE.]		c	nange 🔲 Additio
NAME '	HARTMANN, KURT	_	4.2	NAME				
STREET ADOPESS	8418 BUTTERNUT RD BX 12	2	4.3	STEEF	T ADDRESS			
CITY-ST-ZIP	FT. MYERS FL		4.4	CITY	SI-ZIP			
TITLE		DELETE	5	1 TITLE			c	hange 🔲 Additio
NAME	•		5.2	NAME				
STREET ADDRESS			5.3	STREE	I ADDRESS			
CITY-ST-ZIP	_ ,		5.4	CiTY-	ST - ZIF			
TITLE		DELETE	6	1 TITLE			c	hange 🔲 Additio
NAME			62	NAME				
STREET ADDRESS			63	STREE	ET ADURESS			
	1		1 .		or 7.5			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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 an attachment with an address.

SIGNATURE: