## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # 445934 (3)SNODGRASS HEATING AND AIR CONDITIONING, INC. Mailing Address Principal Place of Business P. O. BOX 940275 P. O. BOX 940275 8850 S. U.S. HWY. 17 & 92 8850 S. U.S. HWY. 17 & 82 MAITLAND FL 32794-0275 MAITLAND FL 32794-0275 3. Date Incorporated or Qualified 3a. Date of Last Report 02/06/1974 04/16/1996 Applied For 26 S. Huy 17.92 P.O. Box Not Applicable 59-1545330 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation has liability for intangible tax under s. 199.032, Servinoli Drunce Yes 🔲 No Florida Statutes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name PONDER, STEWART RAY 8850 S US HWY 17-92 82 MATLAND FL 32751 83 11. Pursuant to the previsions of Sections 607 0502 and 607 1508. Florida Statutes, the abore-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporations board of directors. Thereby accept the appointment as registered agent. I am lappiar with, and accept the objection of Stripin 607 plog. Florida Statute.

SIGNATURE name of rigistered agent and little if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6 13. DELETE Change 1.1 TITLE Addition THILI PONDER, DONNA J. 12 NAME NAME **CR2E034** 1371 LYNDALE BLVD. STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL 1.4 CITY - ST - ZIP CITY-ST-7# Addition DELETE ... Change TITLE 2.1 TUTLE PONDER, STEWART RAY 2.2 NAME 1371 LYNDALE BLVD. STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL 2. 4 CITY-ST-ZIP City - ST - ZiP DELETE 31 TITLE Change Addition TITLE 3.2 NAME PONDER BRIAN NAME 3.3 STREET ADDRESS 611 DAVID ST. STREET ADDRESS WINTER SPRINGS FL 32708 34. CITY-ST-ZIP Change DELETE HILE 4 1 TITLE Addition NAM: 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City-St-ZIP CifY-ST-ZIP Change DELETE Addition 5.1 TITLE TITLE HAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CHY-SI-76 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE THEF NAMÉ **6.2 NAME** STREET ADDRESS 6.3 STREET ADDRESS

14. I do 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 annual report or supplemental annual report is true and afcurate 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 Accute this report as isopulred 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.

6.4 CITY - ST - ZIP

SIGNATURE:

CHY-ST ZIE

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D OR PRINTED NAME OF BIGNING

J 3/26/2

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FILED

Apr 09 1997 8:00am

Secretary of State

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