

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90194 033 \*\*\*158.75

**DOCUMENT #445934**

1. Entity Name  
**SNODGRASS HEATING AND AIR CONDITIONING, INC.**



Principal Place of Business  
**1965 HUNTERFIELD RD  
MAITLAND, FL 32751 US**

Mailing Address  
**P. O. BOX 940275  
MAITLAND, FL 32794-0275 US**

40000127



2. Principal Place of Business  
**1067 Lemon BLVD RD.**  
Suite, Apt. #, etc.

3. Mailing Address  
**P.O. Box 940275**  
Suite, Apt. #, etc.  
**MAITLAND, FL 32794-0275**  
City & State  
**MAITLAND FL.**

04102006 Chg-P CR2E034 (11/05)

City & State  
**OSTEEN, FL**

City & State  
**MAITLAND FL.**

4. FEI Number  
**59-1545330**

Applied For  
Not Applicable

Zip  
**32764**

County  
**Volusia**

Zip  
**32794-0275**

Country  
**Orange**

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

6. Name and Address of Current Registered Agent

**PONDER, STEWART RAY  
1965 HUNTERFIELD RD  
MAITLAND, FL 32751**

7. Name and Address of New Registered Agent

Name  
**PONDER, STEWART RAY**

Street Address (P.O. Box Number is Not Acceptable)

**1067 Lemon BLVD RD.**

City  
**OSTEEN**

FL

Zip Code  
**32764**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**4/14/2006**

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
PONDER, DONNA J.  
1965 HUNTERFIELD RD  
MAITLAND, FL 32751**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
PONDER, STEWART RAY  
1965 HUNTERFIELD DR  
MAITLAND, FL 32751**

☐ Delete

**1067 Lemon BLVD RD  
Osteen FL 32764**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**Secretary  
HUSTEAD, SHARAN MURPHY  
200 St. Andrews Blvd. #3203  
Winter Park, FL 32792**

☒ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
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☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4/14/2006 4073321900**