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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 488354 (2)

1. Corporation Name

LINDSTROM AIR CONDITIONING, INC.

Principal Place of Business

6601 LYONS ROAD  
D-8  
COCONUT CREEK FL 33073

Mailing Address

6601 LYONS ROAD  
D-8  
COCONUT CREEK FL 33073



3. Date Incorporated or Qualified  
10/24/1975

3a. Date of Last Report  
03/08/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LINDSTROM, CARL E  
6601 LYONS RD.  
COCONUT CREEK FL 33073

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-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 corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME LINDSTROM, CARL E  
STREET ADDRESS 12289 WILES RD  
CITY-STATE-ZIP CORAL SPRINGS FL

1.2 NAME  
1.3 STREET ADDRESS 6601 LYONS ROAD - D-8  
1.4 CITY-STATE-ZIP COCONUT CREEK, FL 33073

TITLE SD ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME LINDSTROM, DEBORAH A  
STREET ADDRESS 12298 WILES RD  
CITY-STATE-ZIP ORAL SPRINGS FL

2.2 NAME  
2.3 STREET ADDRESS 6601 LYONS ROAD - D-8  
2.4 CITY-STATE-ZIP COCONUT CREEK, FL 33073

TITLE VD ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME LINDSTROM, JEFFERY C.  
STREET ADDRESS 12298 WILES ROAD  
CITY-STATE-ZIP CORAL SPRINGS FL

3.2 NAME  
3.3 STREET ADDRESS 6601 LYONS ROAD - D-8  
3.4 CITY-STATE-ZIP COCONUT CREEK, FL 33073

TITLE VD ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME LINDSTROM, DOUGLAS  
STREET ADDRESS 12298 WILES RD  
CITY-STATE-ZIP CORAL SPRINGS FL

4.2 NAME  
4.3 STREET ADDRESS 6601 LYONS ROAD - D-8  
4.4 CITY-STATE-ZIP COCONUT CREEK, FL 33073

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-STATE-ZIP

5.4 CITY-STATE-ZIP

TITLE

6.1 TITLE

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-STATE-ZIP

6.4 CITY-STATE-ZIP

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 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 12 or Block 13. If changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/1996 954-420-5300  
Date Daytime Phone #

CR2E034 (12/95)