

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 515751
1. Corporation Name

Comfort Systems USA of FL Inc.

Principal Place of Business

Mailing Address

1026 Savage Court
Longwood, FL 32750

1026 Savage Court
Longwood, FL 32750

FILED

99 SEP -7 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/06/99

2. Principal Place of Business

2a. Mailing Address

21 1026 Savage Court

26 1026 Savage Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

23 City & State
Longwood, FL 32750

28 City & State
Longwood, FL 32750

24 Zip Country
32750 USA

29 Zip Country
32750 USA

4. FEI Number

59-1691261

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Bodwell, Elizabeth
1026 Savage Court
Longwood, FL 32750

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: Elizabeth G. Bodwell

Elizabeth G. Bodwell

08/06/99

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 President ☐ DELETE
NAME Kenneth A. Bodwell
STREET ADDRESS 1521 Frances Drive
CITY-ST-ZIP Apopka, FL 32703

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE Vice President/Service ☐ DELETE
NAME Paul Coveney
STREET ADDRESS 1324 Dunhill Drive
CITY-ST-ZIP Longwood, FL 32750

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE Vice President/Installation ☐ DELETE
NAME Nicholas Bodwell
STREET ADDRESS 1226 Poinsettia Dr.
CITY-ST-ZIP Apopka, FL 32703

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE Vice President/Sales ☐ DELETE
NAME Richard Bodwell
STREET ADDRESS 2434 Canterclub Trail
CITY-ST-ZIP Apopka, FL 32712

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE Sole Director ☐ DELETE
NAME Gordie Beittenmiller
STREET ADDRESS 777 Post Oak Blvd, Suite 500
CITY-ST-ZIP Houston, TX 77056

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE Vice President/corporate ☐ DELETE
NAME Pete O'Brien
STREET ADDRESS 777 Post Oak Blvd., suite 500
CITY-ST-ZIP Houston, TX 77056

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth A. Bodwell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/06/99 (407) 265-1480
(407) 843-3770

Date

Daytime Phone #

CR2E034 (1/98)