2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 12, 2004 08:00 AM Secretary of State **DOCUMENT # 515751** 1. Entity Name COMFORT SYSTEMS USA (FLORIDA), INC. Principal Place of Business Mailing Address 799 BENNETT DR LONGWOOD FL 32750 799 BENNETT DR LONGWOOD FL 32750 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc CR2E034 (11/03) 4. FEI Number City & State City & State Applied For 59-1691261 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City Zio Code 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, typed or printed name of registered agent and little if applicable DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete Change Addition U00000047891 NAME MARTIN, JOHN C NAME STREET ADDRESS 794 BENNETT DR STREET ADDRESS 02/12/04-80058-018 150.00 CITY-ST-ZIP LONGWOOD FL 32750 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME HONEYCUTT, MILBURN NAME STREET ADDRESS 777 POST OAK BLVD, STE 500 STREET ADDRESS CITY-ST-ZIP HOUSTON TX 77056 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME BEITTENMILLER, GORDON NAME STREET ADDRESS STREET ADDRESS 777 POST OAK BLVD STE 500 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77056 VS. TITLE Delete TITLE ☐ Change ☐ Addition GEORGE, WILLIAM NAME NAME 777 POST OAK BLVD STE 500 STREET ADDRESS STREET ADDRESS HOUSTON TX 77056 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GRAWNER, JENNIFER A NAME NAME 799 BENNETT DR STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SANCHEZ, MICHAEL NAME NAME 777 POST OAK BLVD, STE 500 STREET ADDRESS STREET ADDRESS HOUSTON TX 77056 CITY-ST-ZIP

FILED

12. 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 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: JENNIFER A GRAMMER 1/27/04 \$07-830-5000