

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90144 004 ***150.00

DOCUMENT # 559259

1. Entity Name

ALVIS HEATING & COOLING, INC.



Principal Place of Business

817 HONORE AVENUE
SARASOTA FL 34232

Mailing Address

817 HONORE AVENUE
SARASOTA FL 34232

2. Principal Place of Business

817 HONORE AVE

Suite, Apt. #, etc.

3. Mailing Address

817 HONORE AVE.

Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/05)

City & State

SARASOTA, FLORIDA

City & State

SARASOTA, FL

4. FEI Number

59-1787890

Applied For

Not Applicable

Zip

34232-2763

Country

FLORIDA

Zip

34232-2763

Country

FLORIDA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALVIS, RICKY L.
817 HONORE AVENUE
SARASOTA FL 34232

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

RICKY L. ALVIS, PRESIDENT 3/23/06

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------|---------------------------------|
| TITLE | ST | <input type="checkbox"/> Delete |
| NAME | ALVIS, JAMES E. | |
| STREET ADDRESS | 817 HONORE AVENUE | |
| CITY-ST-ZIP | SARASOTA FL | |
| TITLE | P | <input type="checkbox"/> Delete |
| NAME | ALVIS, RICKY L. | |
| STREET ADDRESS | 817 HONORE AVE. | |
| CITY-ST-ZIP | SARASOTA FL | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | ALVIS, MIA | |
| STREET ADDRESS | 817 HONORE AVE. | |
| CITY-ST-ZIP | SARASOTA FL | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|----------------|---|
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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

RICKY L. ALVIS

3/23/06

941.371.3945

Date

Daytime Phone #