

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90183 042 ***150.00

DOCUMENT # 658174

1. Entity Name

H & M BOILER SERVICE, INC.



Principal Place of Business

~~2100 N~~ PRAIRIE INDUSTRIAL PKWY
PO BOX 253
MULBERRY FL 33860

Mailing Address

~~2100 N~~ PRAIRIE INDUSTRIAL PKWY
PO BOX 253
MULBERRY FL 33860

94069659



MOORE

CR2E034 (11/03)

2. Principal Place of Business

395 PRAIRIE IND PKWY
Suite, Apt. #, etc.

3. Mailing Address

PO Box 253
Suite, Apt. #, etc.

City & State

MULBERRY FL

City & State

MULBERRY FL

4. FEI Number

59-1991591

Applied For

Not Applicable

Zip

33860

Country

FL

Zip

33860

Country

FL

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HALL, ALAN
2020 HWY. 37 SOUTH
MULBERRY FL

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 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 PM
NAME HALL, ALAN P
STREET ADDRESS 2020 HWY 37 SOUTH
CITY-ST-ZIP MULBERRY FL 33860 ☐ Delete

TITLE D
NAME HALL, BARNEY
STREET ADDRESS 124 W JULIAN WAY
CITY-ST-ZIP AUBURNDAL FL 33823 ☐ Delete

TITLE SD
NAME BECHTOL, JOHN
STREET ADDRESS 1304 SUMMIT CHASE DR
CITY-ST-ZIP LAKE LAND FL 33813 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME
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CITY-ST-ZIP ☐ Change ☐ 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 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:

Alan P. Hall

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/04 (863) 425-4212

Date

Daytime Phone #