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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

TAYLOR  Principal Place % ROBERT D T 119 HWY 79 \$	REFRIGERATION, INC. e of Business TAYLOR	Mailing Address  * ROBERT D TAYLOR 119 HWY 79 50, PANAMA CITY BEACH FL 3	2413	3. Date Incorporated or Qualified	3a. Date of Last Report
				08/26/1980	03/27/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. :	H sto	Suite, Apt #, etc.		59-1969370	Not Applicable \$8.75 Additional
22	#, <b>C</b> K	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	)	City & State		6. Election Campaign Financing	\$5.00 May Be
23		[28]		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032, ☐ Yes ☐ No
24	9. Name and Address of Curren		30	Florida Statutes  10. Name and Address of New Re	
TAY	OR, ROBERT D		81 Name		
119 HWY 79 500TH			82 Street Addre	ess (P.O. Box Number is Not Acceptal	hla)
	AMA CITY BEACH FL 32413			000 (1.0. 00. 1101/100/1017000)	
			83		
			84 City		FL 85 Zip Code
SIGNATURE	Signature typed of printed name of registrary ages	of and title if appt cable (NOTE:	Registered Agent signature require	ed when reinstating)	DATE DATE
12.	OFFICERS AND	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12  Change Addition
NAME	TAYLOR, ROBERT DANIEL		1.2 NAME		
STREET ADDRESS	103 COLINA CIRCLE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH FL		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		Change Addition
NAME	TAYLOR, CARRIE A		2.2 NAME		
STREET ADDRESS	103 COLINA CIRCLE PANAMA CITY BCH FL		2 3 STREET ADDRESS 2. 4 City - St - Zip		
CITY-S1-ZIP TITLE	VD VD	☐ DELETE	3.1 TITLE	· , , , , , , , , , , , , , , , , , , ,	Change Addition
NAME	TAYLOR, DEBRA K		3.2 NAME		
STREET ADDRESS	103 COLINA CIRCLE		3.3 STREET ADDRESS		
CITY - ST - ZIP	PANAMA CITY BCH FL	T busts	3.4. CITY-ST-ZIP		T Observe T Addition
TITLE	TD TOCAL	☐ DELETE	4.1 TITLE 4.2 NAME		Change Addition
NAME STREET ADDRESS	TAYLOR, TREVA 103 COLINA CIRCLE		4.2 NAME 4.3 STREET ADDRESS	•	
CITY-ST-ZIP	PANAMA CITY BCH FL		4.4 CITY-ST-ZIP	:	
TITLE	77444127 0717 001110	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Lorer	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 THTLE		Change Addition
NAME PERFET ADDRESS			6.2 NAME		
STREET ADDRESS CITY-S1-ZIP			6.3 STREET ADORESS 6.4 CITY+ST-ZIP		
14. Ldn herel	by certify that the information supplied	with this filing does not qualify	for the exemption stated	in Section 119.07(3)(i), Florida Statut	es. I further certify that the
unformatic.	of indigated on this applied coport or c	unnlamental angual report is tr	in and accurate and that	my signature shall have the same leg t as required by Chapter 607, Florida	al affect or if made under eath: that