

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2005 08:00 A
Secretary of State

DOCUMENT # F00000005454

1. Entity Name
S & K AIR CONDITIONING CO., INC.



Principal Place of Business
1810 EAST PARK AVENUE
VALDOSTA, GA 31602

Mailing Address
P.O. BOX 4270
VALDOSTA, GA 31604-4270



03292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2178210

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C.T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SCRUGGS, JAMES J
STREET ADDRESS	1810 EAST PARK AVENUE
CITY-STATE-ZIP	VALDOSTA, GA 31602
TITLE	S
NAME	SCRUGGS, JULIA E
STREET ADDRESS	1810 EAST PARK AVENUE
CITY-STATE-ZIP	VALDOSTA, GA 31602
TITLE	T
NAME	HOWELL, KIM
STREET ADDRESS	1810 EAST PARK AVENUE
CITY-STATE-ZIP	VALDOSTA, GA 31602
TITLE	VAS
NAME	BEITTENMILLER, J. GORDON
STREET ADDRESS	777 POST OAK BLVD, SUITE 500
CITY-STATE-ZIP	HOUSTON, TX 77056
TITLE	VASD
NAME	GEORGE, WILLIAM
STREET ADDRESS	777 POST OAK BLVD, SUITE 500
CITY-STATE-ZIP	HOUSTON, TX 77056
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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11/06/05-80079-004 150.00

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IN THIS SPACE**

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:

William George

3-30-05

713-830-9600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #