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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 DOCUMENT # F92264

1. Corporation Name

SUNSHINE HEATING & AIR CONDITIONING, INC.

										<b>                                    </b>	
Principal Place of Business Mailing Address							I JABISTA LICE SECTION DISTRICT				
1606 ABER RD		1606 ABER RU	1606 ABER RD								
ORLANDO FL 3		ORLANDO FL	ORLANDO FL 32807				DO NOT WRITE IN THIS SPACE				
		•				<u> </u>			SPACE		
						3	3. Date Incorporated or Qualife	ď		J	
							07/28/1982				
2. Principal Pl	ace of Business	2a. Mailing A	ddress			4	4, FEI Number			olied For	
21		26	26				<u>59-2210227</u>			t Applicable	
Suite, Apt.	#, etc.	Suite, Apl	Suite, Apt. #, etc.			ء ا	5. Certifcate of Status Desired		<b>\$8.75</b> ∧		
22 -		27 -	27				·		Fee Re	quired _	
City & State	9	City & Sta	ate			6	<ol><li>Election Campaign Financing</li></ol>	· 🗆	\$5.00	May Be	
23		28					Trust Fund Contribution		Added to	o Fees	
Zip	Country	Zip		Country		8	<ol><li>This corporation owes the cu</li></ol>	irrent year In	tangible	_/	
24	25	29	30				Personal Property Tax.			ØNo	
•	9. Name and Address of Currer	it Registered Age	nt			10	<ol><li>Name and Address of New</li></ol>	Registered	Agent		
				81	Name	e				ĺ	
MATTINGLY, ROBERT OR RUGGLES, WESLEY					82 Street Address (P.O. Box Number is Not Acceptable)						
1606 ABER ROAD				OZ Street Address			(1 .O. Box (turnber to viol violo)	, and a			
SUITE 19 & 20				83		- '					
ORL	ANDO FL 32807 .								1 4 1 27 6		
				84	City			FI	85 Zip C	ode	
11 Purcuant	to the provisions of Sections 607.050	2 and 607 1508 F	Inrida Statutes 1	the above	e-name	ed corporati	ion submits this statement for the	е ригрозе о	f changing its	registered	
office or re	naictored agent or both in the State	of Florida, Such ch	range was autho	inzed by	the con	rporation's l	board of directors. I hereby acc	ept the appo	intment as req	gistered	
agent. I a	m familiar with, and accept the obliga	tions of, Section 6	07.0505, Florida	Statutes							
SIGNATURE		- C	NOTE: B	:		in a size of when	n sainstating)	DATE			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere  12. OFFICERS AND DIRECTORS 13					it signature	re required wite	ADDITIONS/CHANGES TO C		ND DIRECTO	RS IN 12	
12.			DELETE	1.1 TITLE		-T	ABBITIONS/GIA INCLE TO C		Change	Addition	
TITLE	PD	-	J DELEVE				,			_	
NAME	MATTINGLY, ROBERT C.			1.2 NAME	<b></b> .						
STREET ADDRESS	750 ROBIN LANE			1.3 STREET		55				ĺ	
CITY-ST-ZIP	OVIEDO FL		7 DELETE	1.4 CITY-S	T-ZIP				Change	Addition	
TITLE	VTD	Ŀ	] DELETE	2.1 TITLE					☐ Change		
NAME	RUGGLES, A. WESLEY			2.2 NAME							
STREET ADDRESS	_27.15 ABBEY AVENUE			2.3 ŞTREET	T ADDRES	ss		•	-	÷	
CITY-ST-ZIP	ORLANDO FL			2.4 CITY-5	ST-ZIP						
TITLE			DELETE	3.1 TITLE					Change	☐ Addition	
NAME				3.2 NAME							
STREET ADDRESS				3.3 STREE	TADORES	SS				}	
CITY-ST-ZIP				3.4. CITY- S	T-ZIP						
TITLE	U. 138NV.		DELETE	4.1 TITLE					Change	☐ Addition	
NAME I				4. 2 NAME							
STREET ADDRESS				4.3 STREE	TADORES	ss				ļ	
CITY+ST-ZIP				4.4 CITY-S						ì	
TITLE			DELETE	5.1 TITLE					Change	Addition	
NAME		_		5.2 NAME							
				5.3 STREE	TADORES	ss					
STREET ADDRESS				5.4 CITY-S							
CITY-ST-ZIP			DELETE	6.1 TITLE	, 💴				☐ Change	Addition	
TITLE		L.		6.2 NAME					_ =90		
NAME					TADODEŌ						
STREET ADDRESS				6.3 STREE		20					
CITY-ST-ZIP İ	1			6.4 CITY-S	I-ZIP						

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or not an attachment with an artists with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90102 012 \*\*\*150.00