

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 05, 1999 8:00 am
Secretary of State

04-05-1999 90007 050 ***150.00

DOCUMENT # F97000005462

1. Corporation Name

LENNOX GLOBAL LTD. COMPANY

Principal Place of Business
2100 LAKE PARK BLVD.
RICHARDSON TX 75080-2254

Mailing Address
2100 LAKE PARK BLVD.
RICHARDSON TX 75080-2254



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		10/17/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		75-2600663	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		24	
25		29		30	
24		25		29	
24		25		29	

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CCEO	<input type="checkbox"/> DELETE
NAME	NORRIS, JOHN W JR.	
STREET ADDRESS	2100 LAKE PARK BLVD.	
CITY-ST-ZIP	RICHARDSON TX 75080-2254	
TITLE	DVT	<input type="checkbox"/> DELETE
NAME	WYANT, CLYDE	
STREET ADDRESS	2100 LAKE PARK BLVD.	
CITY-ST-ZIP	RICHARDSON TX 75080-2254	
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	JENKINS, ROBERT L	
STREET ADDRESS	2100 LAKE PARK BLVD.	
CITY-ST-ZIP	RICHARDSON TX 75080-2254	
TITLE	S	<input type="checkbox"/> DELETE
NAME	EDWARDS, CARL E JR.	
STREET ADDRESS	2100 LAKE PARK BLVD.	
CITY-ST-ZIP	RICHARDSON TX 75080-2254	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	TEELING, ANNE W	
STREET ADDRESS	2100 LAKE PARK BLVD.	
CITY-ST-ZIP	RICHARDSON TX 75080-2254	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	William Lane Pennington	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	2100 Lake Park Blvd.	
1.4 CITY-ST-ZIP	Richardson TX 75080-2254	
2.1 TITLE	Ray W Strong	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	2100 Lake Park Blvd	
2.4 CITY-ST-ZIP	Richardson TX 75080-2254	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Clyde Wyant
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/99

Date

972-497-5000

Daytime Phone #