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**

DOCUMENT # G13871
1. Corporation Name.

SPARKS HEATING & AIR CONDITIONING, INC.

FILED Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90161 049 ***150.00



							IDII OIBIK IODI
Principal Place of Business Mailing Address							
1334 SPAULDING RD DUNEDIN FL 34698		P O BOX 1512 Dunedin Fl 34697			DO MET MEDITE IN THE ORD	.	
US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 12/17/1982		
2. Principal Pl	ace of Business	2a. Mailing Address	_		4. FEI Number	Apı	plied For
21		26			59-2244607 Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	8.75 A	
22		27		,	J. Controlled of Orlands 2001104	Fee Re	quired
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country		Country	•	8. This corporation owes the current year Intangi		
24	25	29 30			t clacital roperty rax:		□No
	9. Name and Address of Curren	t Registered Agent	- 04	I Name	10. Name and Address of New Registered Age	mt	
CDAI	OVE DODEDT E	•	81	Name			
	RKS, ROBERT F		82	Street Addr	Street Address (P.O. Box Number is Not Acceptable)		
_	DEL ORO CT		<u></u>	ļ		N/-	
שטט	EDIN FL 34698	٠	83	1			{
			84	City	F 8	15 Zip (ode
44 Durayant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes th	ne abov	e-named com	eration submits this statement for the number of cha	nging its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was author	rized by	the corporation	on's board of directors. I hereby accept the appointment	ent as re	gistered
SIGNATURE	Signature, typed or printed name of registered ager	And tills if multisplie (NOTE: Peni	rtored Arre	nt signature require	d when reinstating) DATE		
12.			13,	in agriculture requires	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	RS IN 12
TITLE	PD		1.1 TITLE			Change	Addition
NAME	SPARKS, ROBERT F	_	1.2 NAME				
STREET ADDRESS	1866 DEL ORO CT			TADDRESS			Į
	DUNEDIN FL	1.4 CI					ſ
CITY-ST-ZIP TITLE	VS		2.1 TITLE	'		Change	Addition
NAME	SPARKS, DIANE M	2.2 N					}
	1866 DEL ORO CT			TADDRESS			
STREET ADDRESS	DUNEDIN, FL 00000			ST-ZIP	, en en en en		}
TITLE	TD	DELETE 311		01-23] Change	☐ Addition
			3.2 NAME		•		
NAME STREET ADDRESS	1866 DEL ORO CT			T ADDRESS			j
STREET ADDRESS	DUNEDIN, FL 00000						
CITY-ST-ZIP TITLE	DOI-11-00000		3.4, CITY-1 4.1 TITLE] Change	Addition
					_	-	1
NAME	. :	1	4. 2 NAME	T ADDRESS			1
STREET ADDRESS							ļ
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY-8 5.1 TITLE	>1-ZIP] Change	Addition
TITLE			5.2 NAME			- •	-
NAME	·			TADDRESS]
STREET ADDRESS			5.4 CITY-8				
CITY-ST-ZIP	<u> </u>	5.4.0 □ DELETE 6.11		, 4IF] Change	Addition
TITLE		<u> </u>	62 NAME	}		,	
NAME				T ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP	<u> </u>		6.4 CITY-S	51-ZIP	2 (1 de 07/0)/2 Flaid- Otal de 1 flaton audit.	that that	nformation.

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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: