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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 07 1998 8:00am

Secretary of State

Change

Addition

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

G27869

SOUTHEAST PROCESS HEAT AND CONTROL, INC.

Principal Place of Business Mailing Address 5327 COMMERCIAL WAY 5327 COMMERCIAL WAY **STE B108 STE B108** DO NOT WRITE IN THIS SPACE SPRING HILL FL 34606 SPRING HILL FL 34606 3. Date Incorporated or Qualified 03/15/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For COUNTEGE WA COMMERCIAL WA 1144 1144 59-2300414 Not Applicable Sulte, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State SP2114 City & State 6. Election Campaign Financing \$5.00 May Be 1410. SPRUAG Added to Fees 23 28 Trust Fund Contribution Country U.S.A. Country 8. This corporation owes or has paid the current year Intaggible US.A. 34606 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BARBER, RICHARD W. 14032 BOULDER CREEK LANE Street Address (P.O. Box Number is Not Acceptable) **HUDSON FL 34667** 83 Zip Code 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 tille if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition BARBER, RICHARD W. 1.2 NAME 14032 BOULDER CREEK LANE 1.3 STREET ADDRESS STREET ADDRESS **HUDSON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP ■ DELETE TITLE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 affactiment with an address. 352 684-6633 4-29-98

SIGNATURE.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP