

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Monrath
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

05 MAY 22 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G30368** (6)

1. Corporation Name

B.C.D. AIR CONDITIONING & HEATING, INC.

Principal Place of Business

**1944 CALUMET ST.
CLEARWATER FL 34625**

Mailing Address

**1944 CALUMET ST.
CLEARWATER FL 34625**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/21/1983

3a. Date of Last Report

04/29/1994

2. Principal Place of Business

21

2a. Mailing Address

26

State Apt # etc

State Apt # etc

City & State

City & State

4. FEI Number

59-2280363

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for employment tax under 5-102(1)(b)
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BENNETT, ROBERT R.
1944 CALUMET ST.
CLEARWATER FL 34625**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.02(2) and 607.15(2)(b) 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 understand the obligations of Sections 607.02(2)(b) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME	P KINCAID, CLIFFORD C., JR.
2. STREET ADDRESS	1944 CALUMET ST.
3. CITY & STATE	CLEARWATER FL
4. NAME	VST
5. NAME	BENNETT, ROBERT R.
6. STREET ADDRESS	1944 CALUMET ST.
7. CITY & STATE	CLEARWATER FL
8. NAME	
9. STREET ADDRESS	
10. CITY & STATE	
11. NAME	
12. STREET ADDRESS	
13. CITY & STATE	
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	
17. NAME	
18. STREET ADDRESS	
19. CITY & STATE	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY & STATE	
5. NAME	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY & STATE	
9. NAME	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. NAME	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	
17. NAME	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY & STATE	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.02(2)(b) Florida Statutes. I further certify that the information included 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 of this report, or on an attachment with an address.

SIGNATURE:

Robert R. Bennett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robert R. Bennett

4-25-95
Date

813-461-9135
Telephone Number