

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

SEP 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G76933** (2)
1. Corporation Name:
EXECUTIVE COOLING & HEATING, INC.

Principal Place of Business: **1206-F2 ELIZABETH STR
PUNTA GORDA FL 33950
US**
Mailing Address: **13196 DORAL AVE.
PORT CHARLOTTE FL 33953**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/28/1983	3a. Date of Last Report 03/11/1994
4. FEI Number 65-0043263	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 intangible tax under S. 199.03, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business 21	2b. Mailing Address 26
State Apt. # etc. 22	State Apt. # etc. 27
City & State 23	City & State 28
Zip 24	Zip 29

9. Name and Address of Current Registered Agent

**SAFREED, KENNETH T.
13196 DORAL AVE.
PORT CHARLOTTE FL 33953**

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.03(1) 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. Thereby, accept the appointment as registered agent. I am familiar with and accept the obligations of S. 199.03, Florida Statutes.

SIGNATURE

By the registered agent for the corporation, as required by S. 199.03, Florida Statutes.

By the registered agent for the corporation, as required by S. 199.03, Florida Statutes.

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
1. NAME PST SAFREED, KENNETH T. 13196 DORAL AVE PT. CHARLOTTE FL		1. NAME	☐ Change ☐ Addition
2. NAME		2. NAME	☐ Change ☐ Addition
3. NAME		3. NAME	☐ Change ☐ Addition
4. NAME		4. NAME	☐ Change ☐ Addition
5. NAME		5. NAME	☐ Change ☐ Addition
6. NAME		6. NAME	☐ Change ☐ Addition
7. NAME		7. NAME	☐ Change ☐ Addition
8. NAME		8. NAME	☐ Change ☐ Addition
9. NAME		9. NAME	☐ Change ☐ Addition
10. NAME		10. NAME	☐ Change ☐ Addition
11. NAME		11. NAME	☐ Change ☐ Addition
12. NAME		12. NAME	☐ Change ☐ Addition
13. NAME		13. NAME	☐ Change ☐ Addition
14. NAME		14. NAME	☐ Change ☐ Addition
15. NAME		15. NAME	☐ Change ☐ Addition
16. NAME		16. NAME	☐ Change ☐ Addition
17. NAME		17. NAME	☐ Change ☐ Addition
18. NAME		18. NAME	☐ Change ☐ Addition
19. NAME		19. NAME	☐ Change ☐ Addition
20. NAME		20. NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(1)(b), Florida Statutes. Further, I certify that the information included in 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 this corporation or the registered agent 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 any attachment with an address.

SIGNATURE:

Kenneth T. Safreed
SIGNATURE WITH TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth T. SAFREED

5:295

813-637-9800