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PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

H12957 DOCUMENT #
1. Corporation Name

(7)

HEAT PUMPS UNLIMITED, INC.

Principal Place of Business 12155 METRO PKWY.. #5

Mailing Address

12155 METRO PKWY.. #5



| US | L 33912 | FT MYERS FL 33912 US | ! | | 3. Date Incorporated or Qualified 07/19/1984 | 3a. Date 05 | of Las //01/ | t Report 1995 |
|--|--|---------------------------|--|---|--|------------------------|----------------------------|---------------------------------------|
| 2. Principal Place of Business | | 2a. Mailing Address 26 | | 4. FEI Number 59-2522567 | | | Applied For | |
| T | | | | | | | Not Applicable | |
| Suite, Apt. #, etc. City & State 3 | | Suite, Apt. #, etc | | | 5. Certificate of Status Desired | | | 75 Additional se Required |
| | | Oily & State | | 6. Flection Campaign Financing Trust Fund Contribution Added to Fe | | | | |
| Z ip 4 | Country 25 | Z ₁ p | Country 30 | , | This corporation has liability for Flonda Statutes | intangible tax □ No | unde | rs 199 032, |
| | 9. Name and Address of Curren | t Registered Agent | | | 10. Name and Address of New F | Registered A | gent | |
| | | | 81 | Name | | | | |
| | , DOUGLAS | 82 Street Ac | | Street Add | dress (P.O. Box Number is Not Acceptate | ole) | | |
| 12155 METRO PARKWAY #5 FT MYERS FL 33912 | | | 83 | | | | | |
| | | | 84 | City | | FL | 85 | Zip Code |
| SIGNATURE. | Signature, typed or process have of registered agent. OF FICERS AND | | NOTE: Bugistered Age | of signature requir | | DATE | DIDEC | TORS IN 12 |
| | | JUNEGIUNS | I 13. | | ADDITIONS/CHANGES TO OFF | TULES ANU- | LJIHEL | |
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| TITLE | | | | | ADDITIONS/CHANGES TO OFF | | ****** | |
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, Flor da Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

DOUGLAS GRIFFIN

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOGUMENTORS

DOUGLAS GRIFFIN

DOUGLAS

SIGNATURE: