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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

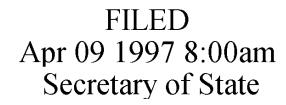
DOCUMENT # H20281

(2)

AMERICAN AIR-CONDITIONING AND HEATING COMPANY, I NC.

Principal Place of Business

Mailing Address





305 W. DETRO PENSAGOLA F		305 W. DETROIT BLVD. PENSACOLA FL 32534-3709								
					3. Date Incorporated or Qualified 09/10/1984	3a. Date of Last Report 05/01/1996				
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number	Applied For			
<u> </u>		26			1-1-1-1	59-2444150	a			pplicabl
Suite. Apt	#, etc	Suite, Apl. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Sta	te	City & State 28 Zip Country			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
Ζιρ 4]	Zip Country Zip 25 29 9. Name and Address of Current Registered Agent					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	9. Name and Address of Curr	rent Hegistered Agent		81	Name	10. Name and Address of New He	gistered	Agent		
			82							
	IO ST MARY'S AVE NSACOLA FL 32501				Street Add	iress (P.O. Box Number is Not Acceptab	ole)			
,				83						
			-	84	City	- William - Carlo College - Ca	C I	85	Zip Cod	le
1 Director	to the requirions of Spetians 607.0	502 and 607 1508 Florida St	atutes the ah			poration submits this statement for the p	FL	Chang	ing ite re	oistoro
agent La GNATURE	am familiar with, and accept the ob-					uired when reinstating)	DATE			
2.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
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ME Name Arconnect	SMITH, LEONARD 305 W. DETROIT BLVD.		1.2 NA		Aboncee					
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14. I do 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 attachment with an address.

SIGNATURE: LEONArd Smith

NATA Smith- Frontier

ptt, Pres 4-

904-476-0016 Daytin to Friends #