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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1**9**98

DOCUMENT #

H28552

(8)

WADE'S HEATING & COOLING, INC.

FILED	
Apr 15 1998 8:00ar	n
Secretary of State	



Principal Place of Business Mailing Address		-{			
Principal Place of Business	*				
12801 METRO PKWY	12901 METRO PKWY FT MYERS FL 33912				
FT MYERS FL 33012	US		DO NOT WRITE IN THIS	SPACE	
	•		3. Date Incorporated or Qualified		
			11/01/1984		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26		59-2484250	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22	27			Fee Required	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23	28	0	Trust Fund Contribution	Added to Fees	
Zip Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible ☑ Yes □ No	
24 25	29 3	<u> 0 </u>	Personal Property Tax due June 30. 10. Name and Address of New Registered		
9. Name and Address of Curre	aut Hedisteled Wallt	81 Name	10. Hallie and Addition of New Hegistered	Agoill	
WADE, JACQUES E.					
12901 METRO PKWY		82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
FT MYERS FL 33912		63			
		63			
		B4 City		85 Zip Code	
			FL		
11. Pursuant to the provisions of Sections 607.05	io of Florida. Such change was au	thorized by the cornora	poration submits this statement for the purpose cation's board of directors. I hereby accept the app	pointment as registered	
agent. I am familiar with, and accept the obli	gations of, Section 607.0505, Flori	da Statutes.		·	
SIGNATURE			ired when reinstating) DATE		
Signature, typed or printed name of registered a	gent and title if applicable (NOTE: ND DIRECTORS	Rogistered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE PVT	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition	
		1.2 NAME			
AAAAA MEEDA DIIIA		1.3 STREET ADDRESS			
CORT MUCDO EI					
CITY-ST-ZIP FOHI MYERS FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition	
NAME		2.2 NAME			
		2.3 STREET ADDRESS		ì	
STREET ADDRESS		2. 4 CITY-ST-ZIP			
CITY-ST-ZIP	DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
		3.4. CHTY - ST - ZIP		j	
CITY-ST-ZIP	DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME	_	4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4 4 CITY-ST-ZIP			
TITLE	DELETE	5.1 TITLE		Change Addition	
NAME	_	5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY - ST - ZIP			
TITLE	DELETE	6.1 TITLE		Change Addition	
NAME		6.2 NAME		1	
STREET ADDRESS		6.3 STREET ADDRESS		•	
1		6.4 CITY-ST-2IP			
CITY-ST-ZIP 14. I hereby certify that the information supplied	with this filing does not qualify for	the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further o	ertify that the information	

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 of truster emphagred 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 attach report with an address.

(941) 768-6300