

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 15, 2001 8:00 am**  
**Secretary of State**

08-15-2001 90005 043 \*\*\*150.00

**DOCUMENT # H55385**

1. Entity Name

**SENSIBLE AIR CONDITIONING, INC.**

Principal Place of Business

**922 SE 13TH PLACE  
UNIT E  
CAPE CORAL FL 33990  
US**

Mailing Address

**4938 SW SECOND AVENUE  
CAPE CORAL FL 33914  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2532612**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NORTH, JEFFREY  
4938 SW SECOND AVENUE  
CAPE CORAL FL 33914**

Name

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

City

**FL**

Zip Code

8. The above named entity is hereby authorized for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed

Registered Agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is electing to satisfy its Intangible  
Tax filing requirements and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00  
After September 12, 2001 Fee will be \$750.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PST NORTH, JEFFREY 4938 SW SECOND AVENUE CAPE CORAL FL 33914</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

**Sensible Air Conditioning Inc.**  
**P. O. Box 150694**  
**Cape Coral, FL 33915**  
**941-574-2921**

*Attachment*  
*#H55385*  
*A008/308*

August 11 2001  
re: late fee

To: Fl. Dept. of State

Dear Sir

As per phone conversation, Aug 10, 2001 I am including this letter pertaining to late filing.

On April 20, 2001 a check # 10575 was mailed out in the amount of \$150.00 to Dept of State for the 2001 uniform business report. As of this date check has not cleared the bank and D.O.S. has not recieved the check as per phone conversation. We were advised to send another one for \$150.00 with this letter of explanation.

SINCERELY,

Jeffrey North, Pres.

