

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 23 PM 2:01

DOCUMENT # H78894 (3)

1. Corporation Name

AIR CONDITIONING & HEATING SERVICE, INC.

Principal Place of Business

% JOSEPH C. TAYLOR
9064 GULF BCH HWY
PENSACOLA FL 32507
US

Mailing Address

% JOSEPH C. TAYLOR
9064 GULF BCH HWY
PENSACOLA FL 32507
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/02/1985

3a. Date of Last Report

03/16/1994

4. FEI Number

59-2592886

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. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

29

Country

30

9. Name and Address of Current Registered Agent

TAYLOR, JOSEPH C.
5672 HERMOSA CIRCLE
PENSACOLA FL 32506

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

JOSEPH C. TAYLOR PRESIDENT

1/16/95

Signature, typed or printed name of registered agent and title (Applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

PD

TAYLOR, JOSEPH C.
5672 HERMOSA CIRCLE
PENSACOLA FL

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

VP

TAYLOR, STANLEY
9068 GULF BCH HWY
PENSACOLA FL

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

T

TAYLOR, HELEN
5672 HERMOSA CIRCLE
PENSACOLA FL

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

S

TAYLOR, DEBORAH C
9068 GULF BEACH HWY
PENSACOLA FL

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

V

TAYLOR, GORDON E
8371 WESTERN WAY DR
PENSACOLA FL

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

☐ Change ☐ Addition

14. 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)(b), Florida Statutes. I further certify that the information included 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Deborah C Taylor

1/16/95 (904) 456-0114