

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H91918

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: ARLINGTON AIR CONDITIONING & HEATING, INC.

## Current Principal Place of Business:

11315-2 ST JOHNS IND PKWY  
JACKSONVILLE, FL 32246 US

## New Principal Place of Business:

11233-7 ST JOHNS IND PKWY  
JACKSONVILLE, FL 32246 US

## Current Mailing Address:

11315-2 ST JOHNS IND PKWY  
JACKSONVILLE, FL 32246 US

## New Mailing Address:

11233-7 ST JOHNS IND PKWY  
JACKSONVILLE, FL 32246 US

FEI Number: 59-3084803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEIDE, MOSES, JR.  
817 N. MAIN STREET  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PARKS, WILLIAM J., J. R.  
Address: 1438 MAGNOLIA CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32211

Title: VP ( ) Delete  
Name: PARKS, JESSES A.,  
Address: 1438 MAGNOLIA CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32211

Title: S (X) Delete  
Name: PARKS, NANCY K.,  
Address: 1438 MAGNOLIA CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32211

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: BEAVERS, BOBBY L PRES.  
Address: 11233-7 ST. JOHNS INDUSTRIAL PKWY.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP (X) Change ( ) Addition  
Name: HASKEW, RICHARD C VP  
Address: 11233-7 ST. JOHNS INDUSTRIAL PKWY.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BOBBY L. BEAVERS

PS

04/30/2003

Electronic Signature of Signing Officer or Director

Date