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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

500 PINE ISLAND-RD



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J08431

(5)

Mailing Address C/O GERALD R PARKER

COMFORT SERVICE OF S.W. FLA., INC.

FILEI)
Feb 28 1997	8:00am
Secretary o	of State

ste 3 - n ft myers fl us	P O BOX 3906 ERS FL 33903 FORT MYERS FL 33918-3906 US		Date Incorporated or Qualified 04/04/1986	3a. Date of Last R 04/16/1996	eport			
2. Principal FI	lace of Business	2a. Mailing Address			4. FEI Number	I Ar	plied For	
1254	Pine Road	26			59-2663458	No	t Applicable	
Suite, Apt.	#. etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75	Additional equired	
City & State	Myers, FL	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added		
Zφ	Country	Zip	Cour	ntry	8. This corporation has liability for in		. 199.032,	
<u>4</u> 3390		29	30			Yes No		
	9. Name and Address of Curre	ant Registered Agent		81 Name	10. Name and Address of New Rec	Jistered Agent		
	KER, GERALD R.			o i Maine		•		
	560 PIND ISLAND RD, STE-5. NORTH FT MYERS FL 33903			82 Street Addi	ddress (P.O. Box Number is Not Acceptable)			
NUN	iin ri mieno ri oosoo			83	THE PROPERTY OF THE PROPERTY O			
			-	84 City		85 Zip	Code	
					poration submits this statement for the pi			
office or r	registered agent, or both, in the Sta on familiar with, and accept the obli	te of Florida. Such change was a	authorized	i by the corporal	tion's board of directors. I hereby accep	it the appointment as	registered	
	Styriotize: type diar printed name of registered a	<u> </u>	<u>.</u>	Agent signature requi		DATE	2018140	
12.	OFFICERS A	IND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	Addition	
1l*tf	PARKER, GERALD R.	□ Offere	1,1 1(1			L Criange	Noonion	
NAMÉ	1254 PINEY RD.		1.2 NA					
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I am an officer or director of the corporation or the receiver or trustee experience to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an attachment with an address.

SIGNATURE:

ER OR DIRECTOR

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