

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90103 012 ***150.00

0341867 AV

DOCUMENT # J79311

1. Entity Name
ANDY TERRY AIR CONDITIONING INC.

Principal Place of Business
4900 S.W. 172ND AVENUE
FT. LAUDERDALE FL 33331

Mailing Address
4900 S.W. 172ND AVENUE
FT. LAUDERDALE FL 33331



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4900 SW 172 AVE

Suite, Apt. #, etc.

3. Mailing Address

4900 SW 172 AVE

Suite, Apt. #, etc.

City & State
SOUTHWEST RANCHES FLA

City & State
SOUTHWEST RANCHES FLA

4. FEI Number **59-2820918**

Applied For
Not Applicable

Zip
33331

Country
USA

Zip
33331

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TERRY, ANDREW J.
4900 S.W. 172ND AVENUE
FT. LAUDERDALE FL 33331

7. Name and Address of New Registered Agent

Name **ANDREW J. TERRY**
Street Address (P.O. Box Number is Not Acceptable)

4900 SW 172 AVE

City **SOUTHWEST RANCHES FL** **Zip Code** **33331**

8. 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 *Andrew J. Terry* **ANDREW J. TERRY** **PRESIDENT**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **1/8/02**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE **P/T** ☐ **Delete**
NAME **TERRY, ANDREW J.**
STREET ADDRESS **4900 S.W. 172ND AVENUE**
CITY-ST-ZIP **FT. LAUDERDALE FL 33331**

TITLE **V/S** ☐ **Delete**
NAME **TERRY, LILA T.**
STREET ADDRESS **4900 S.W. 172ND AVENUE**
CITY-ST-ZIP **FT. LAUDERDALE FL 33331**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **(SAME) ANDREW J. TERRY** ☒ **Change** ☐ **Addition**
NAME **4900 SW 172 AVE**

STREET ADDRESS **SOUTHWEST RANCHES FLA 33331**

TITLE **(SAME) V/S** ☒ **Change** ☐ **Addition**
NAME **LILA T. TERRY**

STREET ADDRESS **4900 SW 172 AVE**

CITY-ST-ZIP **SOUTHWEST RANCHES FLA 33331**

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Andrew J. Terry* **ANDREW J. TERRY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/8/02 **434-3896**

CR2E034 (9/01)