FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY -1 AM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K58552** **(6)**

1. Corporate Name

MUNSON'S A-C & HEATING, INC.

Principal Place of Business

C/O SCOTT B. MUNSON
1541 S.W. 21ST STREET
FT. LAUDERDALE FL 33315
US

Mailing Address

% SCOTT B. MUNSON
1541 S.W. 21ST STREET
FORT LAUDERDALE FL 33315

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/17/1989**

3a. Date of Last Report: **07/01/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

State Apt # or Rm # — 22 / 27

City & State — 23 / 28

24 / 25 / 29 / 30

4. FEI Number: **65-0092992** ☐ 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

7. This corporation has subject or principle place of business in Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MUNSON, SCOTT B.
1541 S.W. 21ST STREET
FORT LAUDERDALE FL 33315

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 Section 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPV	11 TITLE	☐ Change ☐ Addition
NAME	MUNSON, SCOTT B.	12 NAME	
STREET ADDRESS	1541 S.W. 21ST STREET	13 STREET ADDRESS	
CITY ST ZIP	FORT LAUDERDALE FL	14 CITY ST ZIP	
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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 12 or Block 13 if changed or added to the report.

SIGNATURE: Scott B. Munson Scott B Munson 4-21-95 (Date) 463-2250 (Telephone Number)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0023979 CP