


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 01, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # K75931</b> 1. Entity Name FIRST CHOICE AIR CONDITIONING & HEATING OF FLORIDA, INC.	
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Principal Place of Business 2732 WILTSHIRE AVENUE PALM HARBOR, FL 34685	Mailing Address 2732 WILTSHIRE AVENUE PALM HARBOR, FL 34685
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**DO NOT WRITE IN THIS SPACE**



03172004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2987404	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  ULATOWSKI, DAVID SR. 2732 WILTSHIRE AVENUE PALM HARBOR, FL 34685
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**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	000000100855 04/01/04-80025-007 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ULATOWSKI, DAVID M 2732 WILTSHIRE AVENUE PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ULATOWSKI, KERRY E 2732 WILTSHIRE AVENUE PALM HARBOR, FL 34685
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000000100855  
04/01/04-80025-008 8.75

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David Ulatowski Sr 3-30-04 72786-5521  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DAVID ULATOWSKI SR