

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Feb 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L13598 (2)

1. Corporation Name
GRADY AIR CONDITIONING & HEATING, INC.



Principal Place of Business
12231 SKYLER LANE
SPRING HILL FL 34608-2960

Mailing Address
12231 SKYLER LANE
SPRING HILL FL 34608-2960

3. Date Incorporated or Qualified 08/31/1989
3a. Date of Last Report 02/20/1996

2. Principal Place of Business
21 11038 Montcalm Road
Suite, Apt. #, etc.

2a. Mailing Address
26 11038 Montcalm Road
Suite, Apt. #, etc.

4. FEI Number 59-2968188
Applied For Not Applicable

22 Spring Hill, FL
City & State

27 Spring Hill, FL
City & State

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

23 Zip 34608 Country USA

28 Spring Hill, FL
City & State

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

24 34608 25 USA

29 34608 30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRADY, EUGENE V.
12231 SKYLER LANE
SPRING HILL FL 34608

81 Name Grady, Eugene V.
82 Street Address (P.O. Box Number is Not Acceptable) 11038 Montcalm Road
83
84 City Spring Hill FL 85 Zip Code 34608

11. Pursuant to the provisions of Sections 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 Eugene V. Grady PRESIDENT EUGENE V. GRADY 2-12-97
Signature, print or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input checked="" type="checkbox"/> DELETE
NAME	GRADY, EUGENE V.
STREET ADDRESS	12231 SKYLER LANE
CITY-ST-ZIP	SPRING HILL FL
TITLE	VST <input checked="" type="checkbox"/> DELETE
NAME	GRADY, EUGENE V.
STREET ADDRESS	12231 SKYLER LANE
CITY-ST-ZIP	SPRING HILL FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	POVST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Grady, Eugene V.
1.3 STREET ADDRESS	11038 Montcalm Road
1.4 CITY-ST-ZIP	Spring Hill, FL 34608
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 on an attachment with an address.

SIGNATURE: EUGENE V. GRADY PRESIDENT 2-12-97 353-666-1480
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)