FILED

4/13/01

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like

SIGNATURE:

Apr 17, 2001 8:00 am Secretary of State **DOCUMENT # L61853** 1. Entity Name FYE'S AIR CONDITIONING & REFRIGERATION, INC. 04-17-2001 90062 007 ***150.00 Principal Place of Business Mailing Address C/O GEORGE C. FYE C/O GEORGE C. FYE 1226 7TH AVENUE 1226 7TH AVENUE VERO BEACH FL 32960 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE _City & State City & State 4. FEI Number Applied For 59-3003142 Not Applicable Zip Country Zip Country \$8:75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FYE, GEORGE C. Street Address (P.O. Box Number is Not Acceptable) 1226 7TH AVENUE VERO BEACH FL 32960 City! Zip Code FI 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE Delete FYE, GEORGE C. NAME STREET ADDRESS STREET ADDRESS 1226 7TH AVENUE CITY-ST-ZIP CITY-ST-ZIP vero Beach Fl TITLE ☐ Delete TITLE ☐ Change ☐ Addition FYE, CONNIE R. STREET ADDRESS STREET ADDRESS 1226 7TH AVENUE CITY-ST-ZIP CITY-ST-ZIP **VERO BEACH FL** TITLE ☐ Delete TITLE ☐ Change Addition **GUERTIN, JOHN** NAME NAME STREET ADDRESS 1223 7TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP **VERO BEACH FL** ☐ Delete TITI F ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIPI TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

empowered.