

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

DOCUMENT # **L89337**

(4)

1. Corporation Name

NEMETH AIR CONDITIONING, INC.

Principal Place of Business

**8381 GROVE RD
FT MYERS FL 33912**

Mailing Address

**8381 GROVE RD
FT MYERS FL 33912**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 **8720 Alico Road**

26 **8720 Alico Road**

22 Suite, Apt., etc. **#4**

27 Suite, Apt., etc. **#4**

23 City & State **Fort Myers, FL**

28 City & State **Fort Myers FL**

24 Zip **33912** 25 Country **USA**

29 Zip **33912** 30 Country **USA**

3. Date Incorporated or Qualified

07/23/1990

3a. Date of Last Report

08/05/1994

4. FFI Number

65-0209896

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**

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

**NEMETH, KATHLEEN M
8381 GROVE RD
FT MYERS 33912**

81 Name **Mark J. Nemeth**

82 Street Address (P.O. Box Number is Not Acceptable) **8720 Alico Rd, #4**

83

84 City **Fort Myers**

FL

85

33912

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

Mark J. Nemeth

5-15-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	NEMETH, MARK J
STREET ADDRESS	8381 GROVE RD
CITY-ST-ZIP	FT MYERS FL
TITLE	V
NAME	NEMETH, KATHLEEN M
STREET ADDRESS	8381 GROVE RD
CITY-ST-ZIP	FT MYERS FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1. TITLE	☒ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	17450 Caloosa Trace Circle
14 CITY-ST-ZIP	Fort Myers, FL 33912
21 TITLE	☒ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	17450 Caloosa Trace Circle
24 CITY-ST-ZIP	Fort Myers, FL 33912
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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*****225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I 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 in person, 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:

Mark J. Nemeth
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Mark J. Nemeth, President

5-15-95

813/267-3660