

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000079627

1. Entity Name

VORTEX HEATING & AIR CONDITIONING, INC.

Principal Place of Business

1050 ABBOTT AVENUE
SPRING HILL FL 34609

Mailing Address

23 EAST TARPON AVENUE
TARPON SPRINGS FL 34689

2. Principal Place of Business

1843 OAKMONT AVENUE

3. Mailing Address

1843 OAKMONT AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TARPON SPRINGS, FL

City & State

TARPON SPRINGS, FL

4. FEI Number

59-3663891

Applied For

Not Applicable

Zip

34689

Country

Zip

34689

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KLIMIS, GEORGE N
23 EAST TARPON AVENUE
TARPON SPRINGS FL 34689

7. Name and Address of New Registered Agent

Name
BARTLETT, WALTER
Street Address (P.O. Box Number is Not Acceptable)
1843 OAKMONT AVENUE

City
TARPON SPRINGS

FL

Zip Code
34689

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)

DATE

4-19-01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BARTLETT, WALTER
STREET ADDRESS 1050 ABBOTT AVENUE
CITY-ST-ZIP SPRING HILL FL 34609

TITLE D ☐ Delete
NAME HANNA, MICHAEL
STREET ADDRESS 13539 EVELANE DRIVE
CITY-ST-ZIP HUDSON FL 34667

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D/VP ☒ Change ☐ Addition
NAME BARTLETT, WALTER
STREET ADDRESS 1050 ABBOTT AVENUE
CITY-ST-ZIP SPRING HILL, FL 34609

TITLE D/P ☒ Change ☐ Addition
NAME HANNA, MICHAEL
STREET ADDRESS 13539 EVELANE DRIVE
CITY-ST-ZIP HUDSON, FL 34667

TITLE S ☐ Change ☒ Addition
NAME GALL, RICHARD
STREET ADDRESS 13636 LITEWOOD STREET
CITY-ST-ZIP HUDSON, FL 34669

TITLE T ☐ Change ☒ Addition
NAME BARTLETT, TRACY
STREET ADDRESS 10461 CALICO WARBLER
CITY-ST-ZIP BROOKSVILLE, FL 34613

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER BARTLETT

*

4-19-01 (352) 683-2475

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90402 039 ***150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)