

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90330 031 ***150.00

DOCUMENT # P02000048235

1. Entity Name
ALL FLORIDA HEATING & AIR CONDITIONING, INC.



Principal Place of Business
**12765 NEWTON PLACE
WELLINGTON FL 33414**

Mailing Address
**12765 NEWTON PLACE
WELLINGTON FL 33414**

2. Principal Place of Business
1750 Latham Rd

3. Mailing Address
1750 Latham Rd

Suite, Apt. #, etc.
#12

Suite, Apt. #, etc.
#12

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

4. FEI Number
093654950

Applied For
☐ Not Applicable

Zip Country
33409 USA

Zip Country
33409 USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MYERS, SHERRY A
12765 NEWTON PLACE
WELLINGTON FL 33414**

Name
Myers, Sherry A.
Street Address (P.O. Box Number is Not Acceptable)
166 Cardinal Ave

City **Ft. Pierce** **FL** Zip Code **34982**

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 **Sherry A. Myers, President**
Signature, typed or printed name of registered agent and title if applicable.

4/17/03
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **MYERS, SHERRY A**
STREET ADDRESS **12765 NEWTON PLACE**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **P** ☒ Change ☐ Addition
NAME **Myers, Sherry A.**
STREET ADDRESS **166 Cardinal Ave**
CITY-ST-ZIP **Ft. Pierce, FL 34982**

TITLE **VST** ☐ Delete
NAME **MYERS, FRED R**
STREET ADDRESS **12765 NEWTON PLACE**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **VST** ☒ Change ☐ Addition
NAME **Myers, Fred R.**
STREET ADDRESS **2929 Wayne Rd.**
CITY-ST-ZIP **West Palm Beach, FL 33406**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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: **Sherry A. Myers, President**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Sherry A. Myers, President

4/17/03 **561-683-4118**
Date Daytime Phone #

CR2E034 (10/02)