

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVAL
AND
FILED

102

03 OCT -6 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000110265

1. Entity Name
PORT ORANGE HEATING & AIR CONDITIONING
OF VOLUSIA COUNTY, INC.



DO NOT WRITE IN THIS SPACE

102

2. Principal Place of Business
515 Herbert St.

3. Mailing Address
Same

Suite, Apt. #, etc.
C

City & State
Port Orange, FL

City & State
Same

Zip
32127

Country
Volusia

REINSTATEMENT 2003

DO NOT WRITE
IN THIS SPACE

4. FEI Number ☒ Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent

Name
Robert Troup

Street Address (P.O. Box Number is Not Acceptable)
4343-A Ridgewood Ave

City
Port Orange

FL Zip Code
32127

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PSD</u> <u>Michael G. Keane</u> <u>120 Tapanan Dr.</u> <u>New Smyrna Beach, FL 32168</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>500024215895</u> <u>10/28/03--01073--015 **150.00</u>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Michael A. Keane 9/24/03 386-7616690

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2ED34B (12/02)

2 of 2

PORT ORANGE HEATING & AIR CONDITIONING
OF
VOLUSIA COUNTY, INC.
515-C HERBERT STREET
PORT ORANGE, FL 32129

September 24, 2003

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

ATTN: Kathy Ashton, Document Specialist

Re: Corporate Annual Reports - P02000110265

Dear Ms. Ashton;

This letter is our request to have all additional fees and penalties waived for the late filing of the Corporate Annual Report. As stated in the letter from our accountant on September 15, this form was not received by us this year until we were notified that the late filing date was upon us.

A new FORM UBR is enclosed showing the Registered Agent of the corporation. This information was omitted from the previous filing.

Should you have any questions, please feel free to contact this office.

Thank you very much.

Sincerely,

PORT ORANGE HEATING & AIR CONDITIONING OF VOLUSIA COUNTY, INC.



Michael A. Keane,
President