

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90265 017 \*\*\*150.00

**DOCUMENT # P02000112562**

1. Entity Name

T & D MECHANICAL SERVICES, INC.



Principal Place of Business

8738 EXPOSITION DRIVE  
TAMPA FL 33628

Mailing Address

PO BOX 340497  
TAMPA FL 33694

04040104



MOORE CR2E034 (11/03)

2. Principal Place of Business

1717 E. BUSCH BLVD.

3. Mailing Address

Suite, Apt. #, etc.

1001

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

Zip

33612

Country

Zip

Country

4. FEI Number

48-1283456

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STEELE, DEBORAH L  
4512 W. NORTH STREET  
TAMPA FL 33614

7. Name and Address of New Registered Agent

Name

TROY STEELE

Street Address (P.O. Box Number is Not Acceptable)

4512 W. NORTH ST.

City

TAMPA

FL

Zip Code

33614

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

*Deborah L. Steele*

Deborah L. Steele

1/31/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**  
**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 D ☒ Delete  
NAME STEELE, DEBORAH L  
STREET ADDRESS 4512 W. NORTH STREET  
CITY-ST-ZIP TAMPA FL 33614

TITLE D ☐ Delete  
NAME STEELE, TROY E  
STREET ADDRESS 8738 EXPOSITION DRIVE  
CITY-ST-ZIP TAMPA FL 33626

TITLE D ☐ Delete  
NAME KINBERGER, ROY E JR  
STREET ADDRESS 10916 RANDOLPH SIDING RD.  
CITY-ST-ZIP JUPITER FL 33478

TITLE D ☒ Delete  
NAME MORRIS, MARY JANE  
STREET ADDRESS 7750 JODI LYNN DR.  
CITY-ST-ZIP TAMPA FL 33615

TITLE D ☒ Delete  
NAME STEELE, JACK E  
STREET ADDRESS 28523 SONNY DR.  
CITY-ST-ZIP WESLEY CHAPEL FL 33544

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VICEPRESIDENT ☐ Change ☒ Addition  
NAME JEFF MARTIN  
STREET ADDRESS 31733 INKLEY CT.  
CITY-ST-ZIP WESLEY CHAPEL, FL 33544

TITLE PRESIDENT ☒ Change ☐ Addition  
NAME TROY STEELE  
STREET ADDRESS 4512 W. NORTH ST.  
CITY-ST-ZIP TAMPA FL 33614

TITLE TREASURER ☒ Change ☐ Addition  
NAME ROY E KINBERGER JR.  
STREET ADDRESS 10916 RANDOLPH SIDING RD.  
CITY-ST-ZIP JUPITER, FL 33478

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

TITLE ☐ Change ☐ Addition  
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:

*Troy Steele* TROY STEELE

1/31/04

(813) 967-4991

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #