2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2004 08:00 AM Secretary of State

ANNOAL NEPOKI						Sec	cretary of	State
DOCUMENT # P02000113972 1. Entity Name ALL WRIGHT HEATING & AIR CONDITIONING, INC.							or courty of	
Principal Place of Business Mailing Address					7			
		•	2825 ABSHER ROAD					
2825 ABSHER ROAD ST CLOUD, FL 34771		ST CLOUD, FL 34771				Frist danie Somer William State	at sedani iladiral rassal lassa sebarar acasa	linus et inne
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2. Principal Place of Business		3. Mailing Address] 11 1111111111111111111111111111111111	COURTURAL DE PARTICION DE LA COMPANSION DE	<u> </u>	-
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02192004	Chg-P	CR2E034 (10/03)	
City & State		City & State Zip Country		4. FEI Number 22-38824	465	, No	plied For t Applicable	
Zlp	Cauntry	Zip	Coun	nry	5. Certificate of	<u> هم آما آما و الباد ووسيادا عما الـــــــــــــــــــــــــــــــــــ</u>	S8.75 Add Fee Require	
	6. Name and Address of Curren	7. Name and Address of New Registered Agent						
HARDING, ROBERT L				Name Street Address (P.O. Box Number is Not Acceptable)				
20 NORTH EOLA DRIVE ORLANDO, FL 32801					(, , , , , , , , , , , , , , , , , , ,	resident de la compansión	,	
		ar.	~ .	City	<u> </u>		FL Zip Cod	9
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 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 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								
10. OFFICERS AND DIRECTORS			11.		ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTOR	S IN 11
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12. I hereby	certify that the information supplied w	ith this filing does not qualify f	or the exe	emption stated in S	Section 119.07(3)(i)	, Florida Statutes.	I further certify that the	nformation
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 eath; 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.								