

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT #P03000001121

1. Entity Name
CIRCLE M AIR CONDITIONING AND HEATING, INC.



Principal Place of Business Mailing Address
4610 403RD ST. EAST 4610 403RD ST. EAST
MYAKKA CITY, FL 34251 MYAKKA CITY, FL 34251

DO NOT WRITE IN THIS SPACE



01052008 No Chg-P CR2E034 (11/05)

4. FEI Number
27-0041003

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PELLETIER, MAURICE A JR.
4610 403RD ST. EAST
MYAKKA CITY, FL 34251

**DO NOT WRITE
IN THIS SPACE**

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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PELLETIER, MAURICE A JR.
STREET ADDRESS	4610 403ST EAST
CITY-ST-ZIP	MYAKKA CITY, FL 34251
TITLE	V
NAME	PELLETIER, MARCI
STREET ADDRESS	4610 403ST EAST
CITY-ST-ZIP	MYAKKA CITY, FL 34251
TITLE	ST
NAME	PELLETIER, MARCI
STREET ADDRESS	4610 403 ST. EAST
CITY-ST-ZIP	MYAKKA CITY, FL 34251
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000776816
01/09/08-80039-021 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Maurice A Pelletier Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-08

Date

941-322-9107

Daytime Phone #