

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90036 026 ***158.75

DOCUMENT # P03000146886

1. Entity Name

TIM'S AIR CONDITIONING & HEATING, INC.



Principal Place of Business

5850 ENGLISH OAK LANE
NAPLES FL 34119

Mailing Address

5850 ENGLISH OAK LANE
NAPLES FL 34119



2. Principal Place of Business - No P.O. Box #

5850 English Oaks Ln. 5850 English Oaks Ln.

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Naples, FLA

City & State

Naples, FLA

4. FEI Number

56-2428494

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEE, TIMOTHY
5850 10TH AVE NW
NAPLES FL 34119-1332

7. Name and Address of New Registered Agent

Name

Lee, Timothy

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

5850 English Oaks Ln.

City

Naples

FL

Zip Code

34119

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

Timothy Lee Timothy Lee Pres

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/25/07

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 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 PVST
NAME LEE, TIMOTHY ☐ Delete
STREET ADDRESS 5850 10TH AVE NW
CITY- ST- ZIP NAPLES FL 34119-1332

TITLE D
NAME LEE, TIMOTHY ☐ Delete
STREET ADDRESS 5850 10TH AVE NW
CITY- ST- ZIP NAPLES FL 34119-1332

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVST ☐ Change ☐ Addition
NAME Lee, Timothy
STREET ADDRESS 5850 English Oaks Ln.
CITY- ST- ZIP NAPLES, FLA 34119

TITLE D ☐ Change ☐ Addition
NAME Lee, Timothy
STREET ADDRESS 5850 English Oaks Ln
CITY- ST- ZIP NAPLES, FLA 34119

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Timothy Lee Timothy Lee Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/07

Date

239 450 6184

Daytime Phone #