

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90041 036 ***150.00

DOCUMENT # P04000011385

1. Entity Name
COMPLETE HEATING & COOLING, INC.



Principal Place of Business

~~6050 58TH WAY NORTH~~
~~PINELLAS PARK, FL 33781~~

10780-97TH ST.
SEMINOLE, FL 33773

Mailing Address

~~6050 58TH WAY NORTH~~
~~PINELLAS PARK, FL 33781~~

10780-97TH ST.
SEMINOLE, FL 33773

DO NOT WRITE IN THIS SPACE



01022008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0615778

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHRISTIANSEN, CHRISTOPHER J

~~6050 58TH WAY NORTH~~
~~PINELLAS PARK, FL 33781~~

10780-97TH ST.
SEMINOLE, FL 33773

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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)

1/27/08
DATE

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 PD
NAME CHRISTIANSEN, CHRITOPHER J
STREET ADDRESS ~~6050 58TH WAY NORTH~~ 10780-97TH ST.
CITY-ST-ZIP PINELLAS PARK, FL 33781 SEMINOLE, FL 33773

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/27/08