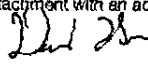


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000044442 1. Entity Name DOYLE HEATING AND COOLING, INC.		
Principal Place of Business 821 S US 301 SUMTERVILLE, FL 33585	Mailing Address 821 S US 301 SUMTERVILLE, FL 33585	
DO NOT WRITE IN THIS SPACE		
8. Name and Address of Current Registered Agent DOYLE, PATRICK L 202 CR 534 BUSHNELL, FL 33513		DO NOT WRITE IN THIS SPACE
9. 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 relocating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOYLE, DAVID W 174 CR 534 BUSHNELL, FL 33513	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOYLE, PATRICK L 202 CR 534 BUSHNELL, FL 33513	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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		



04082006 No Chg-P CR2E034 (11/05)

4. FEI Number
71-0962046

Applied For
Not Applicable

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

000000504004
04/26/06-80053-025 150.00

**DO NOT WRITE
IN THIS SPACE**

4/8/06 352 303-5940
Date Daytime Phone #