

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000141944

1. Entity Name
ANYTIME AIR AND HEATING, INC.



Principal Place of Business
2475 KING ARTHUR COURT
FORT MYERS, FL 33912 US

Mailing Address
2475 KING ARTHUR COURT
FORT MYERS, FL 33912 US



01112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 84-1658424	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TRAPANESE, JOSEPH A
2475 KING ARTHUR COURT
FORT MYERS, FL 33912

**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)

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**

000000790312
01/23/08-80029-014 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME GRAY, RALPH J
STREET ADDRESS 2306 HARVARD AVE.
CITY-ST-ZIP FORT MYERS, FL 33907

TITLE VP
NAME TRAPANESE, JOSEPH A
STREET ADDRESS 2475 KING ARTHUR COURT
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE SEC
NAME TRAPANESE, JOSEPH A
STREET ADDRESS 2475 KING ARTHUR COURT
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE TRES
NAME GRAY, RALPH J
STREET ADDRESS 2306 HARVARD AVE.
CITY-ST-ZIP FORT MYERS, FL 33907

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Trapanese

Date

Daytime Phone #

239
1-16-08 213-6183