## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 51-96-8-5960 DOCUMENT # 1ST CALL HEATING & COOLING, INC. Principal Place of Business Mailing Address 6225 118TH AVE 6225 118TH AVE N LARGO FL 34643 **LARGO FL 34643** HS 3. Date Incorporated or Qualified 3a. Date of Last Report 04/24/1987 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 38-2722850 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 $\Box$ 27 Pee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country 8. This corporation has liability for intangible tax under s. 199.032. 24 25 29 Yes No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name REID. MARVIN R 82 Street Address (P.O. Box Number is Not Acceptable) 6225 118TH AVE N LARGO FL 34643 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE reme altrigi 12. CR2E034 (12/95) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THLE DELETE 1 1 THE Change Addition NAME CURRIER, GLENN 1.2 NAME 7330 RIVER ROAD STREET ADDRESS 1.3 STREET ADDRESS FLUSHING MI CITY - ST - ZIP 1.4 CITY - ST- 7IP TITLE DELETE ST 2 1 TITLE Change ☐ Addition NAME REID, DAWN V 2.2 NAME 12350 98TH AVE N STREET ADDRESS 2.3 STREET ADDRESS SEMINOLE FL CITY-ST-ZIP 2 4 CITY - ST. ZIP TITLE DELETE 3 1 THEF Change Addition NAME REID, MARVIN R 3.2 NAME 12350 98TH AVENUE NORTH STREET ADDRESS 3.3 STREET ADDRESS SEMINO FL CITY-S! ZIP 3.4 City - ST - 7/P TITLE DELETE 4 1 THTLE Addition ☐ Change NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SI-ZIP 4 4 CITY - ST - ZIP THLE DELETE 5.1 TILLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STHEFT ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6 1 lifts Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CHTY-ST-ZIP 64 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if chapage. Or on an attachment with an address

ING OFFICER OR DIRECTOR

SIGNATURE:

4-30-46

8/3-3970500