FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT #** 1. Corporation Name

ADVANCED HEATING & AIR, INC.

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90043 009 ***150.00

	,,,								
Principal Plac	e of Business	Mailing Address				-			
276	& SPRING LAKE	-Rn.							!
050 0=1	GUNAY SPRING	S. F. 32	433	•					
2368 SPRING LAKE RO. DEFUNIAK SPRINGS, FC. 324:						DO NOT WRITE IN THIS SPACE			ı
						3. Date Incorporated or Qualified			'
2 District Discont Durings						9-2-10		-U-1F-	ĺ
2. Principal Place of Business 2a. Mailing Address						4. FEI Number 59-3/99626	<u> </u>	plied For	l
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						31-3119020	\$8.75 A	t Applicable	1
¬ '''						5. Certifcate of Status Desired	Fee Re		i '
22						6. Election Campaign Financing		·	
23	•	28				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Zip. Country				-8This corporation owes the current year Intangible			ĺ
24	25 29 3					Personal Property Tax.	□Yes	No.	
	9. Name and Address of Current	Registered Agent	17.71			10. Name and Address of New Registered	d Agent		ĺ
EWED	en A. STEADA	nan		81	Name				
EVER	COLLEGE LAKE	-02		82	Stroot Addr	ess (P.O. Box Number is Not Acceptable)			ĺ
2368 SPRING LAKE RD. DEFUNIAK SPRINGS, FL					Street Addre	ess (F.O. Box Number is Not Acceptable)			i
DE	FUNIAK SPNIN	res, t		83					
PL		32433	•			<u> </u>	T - T		
		32433		84	City	FI	85 Zip C	ode	1
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508 Florida Stat	utes, the al	LL_ bove-r	named corpo			registered	
office or r	egistered agent, or both, in the sate of	Florida Such change was	authorized	by th	e corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the appoints	ointment as reg	gistered	
		ons of Section 607/05/05, r	iorida Statt	uies.		3-28	-99		
SIGNATURE	Signalizar (ped or printed agent of registered agent of	and title if applicable. (NO	TE: Registered	Agent si	ignature required	when reinstating) DATE			_
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	CR2E034 (11/98)
TITLE	PRESIDENT DELETE		1.1 TIT	1.1 TITLE			Change	Addition	Ξ
NAME	FUERFIT A. STEADMAN		1.2 NA	1.2 NAME					7
STREET ADDRESS	2368 SPRING LAKE, KD.		1.3 ST	1.3 STREET ADDRESS					
CITY-ST-ZIP	DERIMAL SPINAS, 12 32433		1,4 CT	1.4 CITY-ST-ZIP			•		
TITLE	SECRETARY			2.1 TITLE			Change	☐ Addition	\ddot{c}
NAME	RENERA I STEADMAN		2.2 NA	2.2 NAME					
STREET ADDRESS	2368 SPRING PAKE RO. DEFUNIAK SPRINGS, FL 32433		2.3 ST	2.3 STREET ADDRESS					
CITY-ST-ZIP	DEFUNIAR SPRINGS, FL 32133			2.4 CITY-ST-ZIP					
TITLE	DELETE			3.1 TITLE			Change	☐ Addition	
NAME				3.2 NAME				ĺ	
STREET ADDRESS			!	REËT AC	DORESS			 -	
CITY-ST-ZIP				TY-ST-Z					
TITLE		☐ DELETE	4,1 TIT				☐ Change	Addition	
NAME			4. 2 N	4. 2 NAME					
STREET ADDRESS				4.3 STREET ADDRESS		•			
CITY-ST-ZIP	, i			4.4 CITY-ST-ZIP					
TITLE	DELETE			5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NA	5.2 NAME					
STREET ADDRESS	1		5.3 STI	5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CIT	5.4 CITY-ST-ZIP					
TITLE	☐ DELETE		6.1 TIT	6.1 TITLE			Change	Addition	
NAME		•	6.2 NA	ME				ļ	
STREET ADDRESS			6.3 \$TI	REETAD	ORESS			j	
CITY-ST-ZIP			6.4 CIT	Y-ST-Z	IP			[
	ertify that the information supplied with	this filing does not qualify f	or the exer	nption	stated in Se	ection 119.07(3)(i), Florida Statutes. I further ce	ertify that the in	formation	

indicated on this annual report of supplemental annual 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 recorder or trustee annual 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 recorder or trustee annual report is report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on any attachment with an address, with all other like empowered.

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR