


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90263 047 ***150.00

| | |
|---|---|
| DOCUMENT # P93000025718 |  |
| 1. Entity Name ADVANCED HEATING & AIR, INC. | |

| | |
|---|---|
| Principal Place of Business 2368 SPRING LAKE RD DEFUNIAK SPRINGS, FL 32433 US | Mailing Address 2368 SPRING LAKE RD DEFUNIAK SPRINGS, FL 32433 US |
|---|---|

| | |
|--|--|
| 2. Principal Place of Business 386 S. 13TH ST. | 3. Mailing Address 8163 EDGEWOOD DR. |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

| | |
|--|----------------------------------|
| City & State DEFUNIAK SPRINGS FL | City & State DAPHNE AZ |
| Zip 32435 | Zip 36526 |
| Country U.S.A. | Country U.S.A. |



03152004 Chg-P CR2E034 (10/03)

| | |
|--|--|
| 6. Name and Address of Current Registered Agent STEADMAN, EVERETT A 2368 SPRING LAKE RD DEFUNIAK SPRINGS, FL 32433 | |
|--|--|

| | |
|--|--|
| 7. Name and Address of New Registered Agent Name DOUGLAS L. CLEMMONS Street Address (P.O. Box Number is Not Acceptable) 386 S. 13TH ST City DEFUNIAK SPRINGS FL Zip Code 32435 | |
|--|--|

| | |
|--|--|
| 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 <u><i>Doug Clemmons</i></u> DATE <u>4-5-04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | |
|--|--|

| | |
|---|--|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|--|

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------|--|---|---|
| TITLE P | NAME STEADMAN, EVERETT A STREET ADDRESS 2368 SPRING LAKE RD CITY-ST-ZIP DEFUNIAK SPRINGS, FL 32433 | TITLE P | NAME STEADMAN, EVERETT A. STREET ADDRESS 8163 EDGEWOOD DR. CITY-ST-ZIP DAPHNE, AZ 36526 |
| TITLE ST | NAME STEADMAN, REBECCA L STREET ADDRESS 2368 SPRING LAKE RD CITY-ST-ZIP DEFUNIAK SPRINGS, FL 32433 | TITLE ST | NAME STEADMAN, REBECCA L. STREET ADDRESS 8163 EDGEWOOD DR. CITY-ST-ZIP DAPHNE, AZ 36526 |
| TITLE VP | NAME CLEMMONS, DOUGLAS L STREET ADDRESS 386 S. 13TH STREET CITY-ST-ZIP DEFUNIAK SPRINGS, FL 32433 | TITLE | NAME |
| TITLE | NAME | TITLE | NAME |
| TITLE | NAME | TITLE | NAME |
| TITLE | NAME | TITLE | NAME |

| | |
|---|--|
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Doug Clemmons</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | Date <u>251-626-1029</u> <small>Daytime Phone #</small> |