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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000041732 (7)

## **BILL YOUNG REFRIGERATION. INC.**

Principal Place of Business Mailing Address RT 10 BOX 61-Y RT 10 BOX 61-Y LIVE OAK FL 32080-9800 LIVE OAK FL 32060 3a. Date of Last Report 3. Date Incorporated or Qualified 04/10/1996 06/07/1993 2a. Mailing Address Applied For 2. Principal Place of Business 4. FEI Number 109 4 11717 7/ J IJ Not Applicable 26 JEMACE 59-3199864 Suite, Apt. #, et-Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be hive Oak Added to Fees Trust Fund Contribution 23 28 <sup>ಶ್ಥ</sup> **ತಿ**ನ್ನಂಹಿಂ Country 8. This corporation has liability for intangible tax under s. 199 032, Suwannee JUVANNE 29 Yes X No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name YOUNG, WILLIAM J **ROUTE 10, BOX 370** 82 Street Address (P.O. Box Number is Not Acceptable) LIVE OAK FL 32060 83 64 City 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 or registered agent for both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the judicians of, Section 607.0505, Florida Statutes. William
(NOTE Ren stered Agent) SIGNATURE nd to elit applic OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. Change Addition □ DELETE 1.1 TITLE DILE onny william J. 1.2 NAME NAME Young, William J **ROUTE 10, BOX 370** 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY - ST- ZIP OTTY-ST-20F LIVE OAK FL 32060 Change DELETE Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-Z-Change Addition DELETE TITLE 31 TITLE NAME. 3.2 NAME **3.3 STREET ADDRESS** STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIF DELETE Change Addition 1006 4 1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZiF DELETE 5 1 TITLE ☐ Change Addition FIFLE 5.2 NAME STREET ADOPESS 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP CITY ST-ZIP DELETE Change ... Addition 6.1 TITLE TITLE NAM: 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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

SIGNATURE:

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 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 12 or Block 13 if changed, or on an attachment with an address.

Jan 15, 1947 904-364-1460

FILED

Jan 23 1997 8:00am

Secretary of State