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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000060317 (3)

DAN'S AIR CONDITIONING & HEATING, INC.

1 '	ce of Business AGE GREEN DRIVE DIE FL 34952	PORT ST. LUCIE FL 3495	Mailing Address 1484 SE VILLAGE GREEN DRIVE PORT ST. LUCIE FL 34952-3411 US				
0.5		00			3. Date Incorporated or Qualified 08/25/1993	3a. Date of Las 04/10/1996	, ,
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0435134	——————————————————————————————————————	Not Applicable
Suite, Apt #, etc.		Suite, Apt #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	1 7	5 Additional Required
City & Sta	te	City & State	·-·······		6. Etection Campaign Financing		00 May Be
23		28]			'Trust Fund Contribution		ed to Fees
Zip 24	Country 25	Zip 29	Count	ry	This corporation has liability for Florida Statutes	Intangible tax unde	er s. 199.032,
[9. Name and Address of Currer		100		10. Name and Address of New Re		
WA	rren, danny c		8	1 Name			
541 SE VOLTAIR TERR			8	2 Street Add	ddress (P.O. Box Number is Not Acceptable)		
POF	RT ST LUCIE FL 34983		8	3			
			_	4 000		Table 3	to Oods
			j j	4 City		FL (")	Itp Code
office or agent. La	To the provisions of Sections 607.055 registered agent, or both, in the State am lamiliar with, and accept the oblig state the specific or specific and accept the oblig specific provider provider providers agent to the specific of a specific provider providers agent to the specific or specific providers agent to the specific or specific providers agent to the specific providers a				poration submits this statement for the ation's board of directors. I hereby acce	purpose of changin pt the appointment	as registered
12.		IO DIRECTORS	13.	Baut erBuern, e iedr	ADDITIONS/CHANGES TO OFFI		ORS IN 12
111LF	P	DELETE	1.1 1114			Chang	
NAME			1.2 NAM	E			
STREET ADDRESS	541 SE VOLTAIR TERR		1.3 STRE	ET ADDRESS			
D-TY-S1-70P	PT ST LUCIE FL		1.4 CITY				
71111	WARDEN BIANA I		2.1 TITLE	ì		L Chang	ge [] Addition [
NAME STREET ADDRESS	EAR OF MOLTAID TODD		2.2 NAM	ET ADDRESS	•	. :	
CITY-ST-ZIP	PT ST LUCIE FL		2.3 3 Inc				
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NAME STREET ADDRESS				ET ADDRESS			
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STREET ADDRESS			5.3 STRE	ET ADDRESS			Ī
City - S1 - ZiP			5.4 CITY	-ST-ZIP			
TITEE		☐ DELETE	6 1 TITLE]		[] Chang	ge 🔲 Addition
NAME			62 NAM				ļ
STREET ADDRESS			63 STAI	ET ADDRESS			

6.4 CITY-ST-ZIP

14. I do hereby certily 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 annual report or suppliemental annual report is true and accurate and that my signalure 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 Brock 13 if changed, or on an attachment with an address.

SIGNATURE:

FILED

Apr 03 1997 8:00am

Secretary of State