

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 25, 2003 8:00 am**  
**Secretary of State**

06-25-2003 90073 026 \*\*\*558.75

DOCUMENT # P93000067065

1. Entity Name

BEACHSIDE HEAT 'N AIR, INC.



Principal Place of Business  
4434 OLD KING ROAD SOUTH  
FLAGLER BCH FL 32136  
US

Mailing Address  
P.O. BOX 479  
FLAGLER BCH FL 32136  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3204785

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, THEODORE B  
1331 N DAYTONA  
FLAGLER BEACH FL 32136

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

*Theodore B. Johnson*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**NO CHANGE**  
**Reinstating**

**5-5-03**

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE\* PSD ☒ Delete  
NAME JOHNSON, THEODORE  
STREET ADDRESS 1331 N DAYTONA  
CITY-ST-ZIP FLAGLER BEACH FL 32136

TITLE Pres. Sec. Director ☒ Change ☐ Addition  
NAME THEODORE B. JOHNSON  
STREET ADDRESS 1331 NO. DAYTONA AVE.  
CITY-ST-ZIP FLAGLER BEACH, FL. 32136

TITLE VPD ☒ Delete  
NAME JOHNSON, PEGG  
STREET ADDRESS 1331 N DAYTONA  
CITY-ST-ZIP FLAGLER BEACH FL 32136

TITLE V.P. Director ☒ Change ☒ Addition  
NAME ERIC CLAY MILLIKAN  
STREET ADDRESS P.O. BOX 479  
CITY-ST-ZIP FLAGLER BEACH, FL. 32136

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Pres. Director ☒ Change ☒ Addition  
NAME ROBERT M. JOHNSON  
STREET ADDRESS 42 SOCO TRAIL  
CITY-ST-ZIP ORMOND BEACH FL. 32174

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Theodore B. Johnson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THEODORE B. JOHNSON 5-5-03 386-439-9624

Date

Daytime Phone #

CR2E034 (10/02)