FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

DOCUMENT # **P94000018524 (6)**

AIR TITE AIR CONDITIONING & REFRIGERATION, INC.

12000 OVERSEAS HWY
MARATHON FL 33050

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MARATHON FL 33050

3. 03/10/1994

4. FEI Number 65-0474589 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. Florida Statutes — Yes / No

9. Name and Address of Current Registered Agent

MILLER, ROBERT K
12000 OVERSEAS HWY
MARATHON FL 33050

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1908, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
D RICHARDS, LARRY E 904 109TH ST GULF MARATHON FL 33050	2276 Dolphin Dr.	☒ Change ☐ Addition
D RICHARDS, KAREN S 904 109TH ST GULF MARATHON FL 33050	2276 Dolphin DR.	☒ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing, and to the best of my knowledge, believe and belief, is true and correct. I understand that pursuant to Section 607.0505, Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature affirms the same to be the same as made under oath. If an officer or director of the corporation is the owner or trustee represented to complete the report as required by Chapter 607, Florida Statutes, and that my name appears above, or on an attachment with an address.

SIGNATURE: Karen Richards
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
KAREN RICHARDS

4-26-95 305 743-3838

0101202 CP