

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **194066075765**

1. Entity Name

Airtron of Central Florida, Inc.



FILED

03 JUN -4 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3 Greenway Plaza

Suite, Apt. #, etc.

Suite 1900

City & State

Houston, Texas

Zip

77046

Country

Harris

3. Mailing Address

3 Greenway Plaza

Suite, Apt. #, etc.

Suite 1900

City & State

Houston, Texas

Zip

77046

Country

Harris

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3276213

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director, President, Treasurer
Todd A. Matherne
3 Greenway Plaza, Ste. 1900
Houston, TX 77046

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President, Secretary
John A. Hale, Jr.
3 Greenway Plaza, Ste. 1900
Houston, TX 77046

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President, Asst. Treasurer
Robert P. Arnold
3 Greenway Plaza, Ste. 1900
Houston, TX 77046

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President, Asst. Secretary
Edward J. Lamprecht
3 Greenway Plaza, Ste. 1900
Houston, TX 77046

TITLE
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500020523505

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John A. Hale, Jr.

6-2-03

Date

Daytime Phone #

CR2E034B (12/02)



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 117084 7187011

AUTHORIZATION :

COST LIMIT : \$ 550.00

ORDER DATE : June 3, 2003

ORDER TIME : 11:0 AM

ORDER NO. : 117084-005

CUSTOMER NO: 7187011

CUSTOMER: Ms. Monique N. Diaz
Encompass Services Corporation
Suite 2000
3 Greenway Plaza
Houston, TX 77046

ANNUAL REPORT FILING

NAME: AIRTRON OF CENTRAL FLORIDA,
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
_____ PLAIN STAMPED COPY
XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan-EXT#1155

EXAMINER'S INITIALS: _____

RECEIVED
03 JUN -4 AM 11: 23
DIVISION OF CORPORATION