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Apr 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000010601 (9)

1. Corporation Name

HUB CITY COOLING & HEATING, INC.

Principal Place of Business

2940 SHOLTZ AVE.
CRESTVIEW FL 32539

Mailing Address

2940 SHOLTZ AVE.
CRESTVIEW FL 32539-8976



2. Principal Place of Business

21 301 E. EONEY AVE.
Suite, Apt. #, etc.

2a. Mailing Address

26 301 E. EONEY AVE
Suite, Apt. #, etc.

City & State

23 CRESTVIEW FLA.

City & State

28 CRESTVIEW FLA.

Zip

24 32539

Country

25 OKALOOSA

Zip

29 32539

Country

30 OKALOOSA

9. Name and Address of Current Registered Agent

MCKINNEY, RANDALL S
2940 SHOLTZ AVE.
CRESTVIEW FL 32539

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MCKINNEY, RANDALL S
STREET ADDRESS 2940 SHOLTZ AVE.
CITY-ST-ZIP CRESTVIEW FL 32539 ☐ DELETE

TITLE D
NAME AUTERY, RUSSELL W
STREET ADDRESS 3118 BAY RIDGE DRIVE
CITY-ST-ZIP CRESTVIEW FL 32539 ☐ DELETE

TITLE D
NAME MCKINNEY, ANDREW
STREET ADDRESS 721 MCLAUGHLIN AVE.
CITY-ST-ZIP CRESTVIEW FL 32538 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 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 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.

SIGNATURE:

Randall S McKinney Randall S McKinney 4-17-97 (904)689-1757

CR2E034 (9/96)