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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000035929

1. Corporation Name

ASBURY HEATING & SIR CONDITIONING, INC.

FILED
Apr 26, 1999 8:00 an
Secretary of State
•

04-26-1999 90190 028 ***150.00

Principal Place	e of Business	Mailing Address			#	MINI MANIL MANAM NILAN ARKIN I	# [10 (10 10 f0 f) 10 D)
221 COKESBURY CT GREEN COVE SPRINGS FL 32043 US 221 COKESBURY CT GREEN COVE SPRINGS FL 32043 US				·	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	1	
}					05/02/1995		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Appl ed For
21		26			59-33 15 160		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	T	5 Additional Required
City & State		City & State		6. Electior Campaign Financing	□ \$5.0)0 May Be	
23		28		Trust Fund Contribution	Add	ed to Fees	
Zip	ip Country Zip Coun		Country	y	8. This co poration owes the current year Intangible		
24	25	29	30		Personal Property Tax.	☐ Yes	Ø1No
	9. Name and Address of Current	Registered Agent		 	10. Name and Address of New	Registered Agent	
01111	taka sepastipati i		81	Name			
	IAN, KENNETH		82	Street Ad J	ress (P.O. Box Number is Not Accept	table)	
1	COKESBURY CT						
GHE	EN COVE SPRINGS FL 32043		83	3			
			84	City		85 Z	ip Ccde
}			100	City		FIL "	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	es, the abov	e-named co p	poration submits this statement for the	e purpose of changing	its registered
office or n	registered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505, Fig.	utnorized by rida Statute	/ tne corporate s.	on's board or directors, I hereby acce		_
SIGNATURE	ROK (SUISAD)					4. ZZ.	99 I
SIGNATURE	Signature, typed or printed har te of registered agent	ind title if applicable (NOTI	Registered Age	nt signature require	ed when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO O		
TITLE	D	☐ DELETÉ	1.1 TITLE			☐ Chan	ge
NAME	PAINSCHAB, SHEILA M		1.2 NAME				
STREET ADDRESS	221 COKESBURY COURT		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	GREEN COVE SPRINGS FL		1.4 CITY-	ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE			☐ Chan	ge 🔲 Addition 🛭
NAME	PAINSCHAB, RICHARD D		2.2 NAME				
STREET ADDRE 3S	221 COKESBURY COURT		2.3 STREE	ET ADDRESS			
CITY-ST-ZIP	GREEN COVE SPRINGS FL		2.4 CITY-	ST-ZIP			
TITLE	D	X DELETE	3.1 TITLE			Chan	ge
NAME	FRISK, ROBERT E	• •	3.2 NAME				
STREET ADDRE 3S	221 COKESBURY COURT		3.3 STREET ADDRESS				ľ
CITY-ST-ZIP	GREEN COVE SPRINGS FL		3,4. CITY-	ST-ZIP			
TITLE	D	☐ DELETE	4.1 TITLE			☐ Chan	ge Addition
NAME	GUINAN, KENNETH		4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADORESS			
CITY-ST-ZIP	JACKSONVILLE FL_	•	4.4 CITY-				
TITLE	ONO NO OTT I C	☐ DELETE	5.1 TITLE			☐ Chan	ge 🔲 Addition
NAME			52 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			į
			54 CITY-	ST-ZIP			
CITY-ST-ZIP		☐ DELETE	61 TITLE			Chan	ge
NAME		<u> </u>	6.2 NAME				
1			i	TADDRESS			j
STREET ADDRESS			64 CITY-1				ļ

14. 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 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 attact ment with an address with efforts report as required by Chapter 607.

CR2E034 (11/98)