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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # P95000092638 (2)

GLACIER MECHANICAL SERVICES INC.

Principal Place 7739 AVOCET WESLEY CHA		7739 AVC	Mailing Address 7739 AVOCET DR WESLEY CHAPEL FL 33544-2638 US				Date Incorporated or Qualified			
						 	12/06/1995	04	1/22/1996	
├ ── '	Place of Business	 	g Address				4. FEI Number			pplied For
21	H	26					59-3346089			lot Applicable
Suite, Apt		27					5. Certificate of Status Desired Status Pesired Fee Required			
City & Stat		28					6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip 	Country	Zip		Cour	itry		8. This corporation has liability for			a. 199.032,
24	25 9. Name and Address of Curr	29		30			Florida Statutes Yes Y No 10. Name and Address of New Registered Agent			
ļ		rent Registered A	rgent		81	Name	10. Name and Address of New He	gistered	Agent	
	ENAY, CRAIG E			ľ	۱.	Name				
	9 AVOCET DRIVE SLEY CHAPEL FL 33544				82	Street Addre	Address (P.O. Box Number is Not Acceptable)			
					83					
					84	City		FL	_ ' '	Code
office or i agent. La SIGNATURE	registered agent, or both, in the Str am familiar with, and accept the ob- Signature typed or preted name of registered					e-named corporations the corporations in the corporation in the corporatio	oration submits this statement for the jon's board of directors. I hereby acce	pithe ap	or changing i pointment as	ts registered registered
12.		AND DIRECTORS	-	13.			ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	3S IN 12
TITLE	PT		DELETE	1.3 TIT	E				Change	Addition
NAME	CRAIG SZENAY			1.2 NA	ИE					_
STREET ADDRESS	7739 AVOCET DR			1.3 STF	EET	ADDRESS				
CITY - ST - ZIP	WESLEY CHAPEL FL			1.4 CIT	Y~\$1	T-ZIP				
TITLE	VPS		DELETE	2.1 1110					Change	Addition
NAME:	Brenda Szenam			2.2 NAI	ME.					
STREET ADDRESS	7739 AVOCET DRIVE			2.3 STF	EET	ADDRESS		1		
CITY - S1 - 7IP	WESLEY CHAPEL FL			2.4 00	Y-S	ST-ZIP				
TOLE			☐ DELETE	3.1 1111	,E				☐ Change	Addition
NAME				3.2 NA)	ME.					
STREET ADDRESS				3.3 STR	EET :	ADDRESS				
CITY - S1 - 7(P				3.4. CIT	Y-S	ST-ZIP				
TITLE			☐ DELETE	4.1 TiTL	Æ.				Change	Addition
NAME				4. 2 NA	ME					
STREET ADDRESS				4.3 STR	EET.	ADDRESS				
CITY - S1 - ZIP				4.4 CIT	Y-\$1	T-ZIP				
TITLE			DELETE	5.1 TITL	E				Change	Addition
NAME				5.2 NA	ME.					
STREET ADDRESS				5.3 STA	EET.	ADDRESS				
CITY-S1-7IP	MIN SOLO MANAGEMENT AND ADMINISTRATION OF THE PROPERTY OF THE			5.4 CIT	Y - S1	T-21P				
TITLE			DELETE	6.1 TITI	.E				Change	Addition
NAME				6.2 NA	Æ					
STREET ADDRESS				6.3 STA	EET .	ADDRESS				

SIGNATURE:

CITY - \$1 - 2IP

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.

FILED Apr 28 1997 8:00am Secretary of State

