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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT-OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000043968 (1)

Principal Plac	ACEMYER A/C & HEATING	Mailing Address			
181 WILDWOOD DRIVE SANFORD FL 32773		181 WILDWOOD DRIVE SANFORD FL 32773			
				DO NOT WRITE IN TH	IIS SPACE
1				3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address		05/15/1997 4. FE! Number	Applied For
21		26		59-3445511	Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27		· · · · · · · · · · · · · · · · · · ·			Fee Required
City & State	е	Gity & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
25 29			30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Register	e ō A gent
	CEMYER, RODNEY L		81 Name		
	1 Wil dwood drive N FO RD FL 32773		82 Street A	Address (P.O. Box Number is Not Acceptable)	
SA	NEWAD FL 321/3		83		
			A		
4			84 City	F	85 Zip Code
SIGNATURE		OR it and the diapplicable (NOT NO DIRECTORS	f Bagistered Agent signature	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PSTO	☐ DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	FACEMYER, RODNEY L		12 NAME		
STREET ADDRESS	181 WILDWOOD DRIVE SANFORD FL 32773		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PANTOND FL 32773	DOFTEIF	1.4 C(TY+S1+Z(P 2.1 Y(1)E		Change Addition
NAME			2.2 NAME		and original kind reductions
STREET ADDRESS			23 STHEET ADDRESS		
CITY-ST-ZIP			2. 4 CHY-ST-2IP		
TITLE		DETETE	3.1 1111.6	-	☐ Change ☐ Addition
NAME .			3 ? NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - 7IP 4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		.
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 THEF		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	6.4 City - ST- ZIP	والمناو والمال والمناو والمناو والمناو والمناو والمناو والمناو والمناو	ChangeAtdition
NAME			6.2 NAME	9000025588 -06/12/9801091	3 L. 10 1/2
CIDECT ADDRESS			63 CIRELI VIDRECO	TUDY 12/35T-01031	$\int U_{ij} V_{ij}$

14. Thereby 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or tur-lee 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 attaurance with an address.

CICMATURE.

1.7-98

FILED

Jun 12 1998 8:00am

Secretary of State

110- 746 744