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

P97000058554 (1)

ALL VOLUSIA AIR CONDITIONING AND HEATING, INC.

Principal Place		Mailing Address	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/03/1997	
701 DORIS PLA SOUTH DAYTOR		3. Date Incorporated or Qualified		
2. Principal Plac	oe of Business	2a. Mailing Address 2a. Mailing Address 2b. Taylor Rd. 4. FEI Number 59–3455822	Applied For Not Applicable	
Suite, Apt. #, etc.		Suito, Apt. #, etc. 27 Suite #432 5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State 28 Port Orange, FL 6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25		X Yes No	
	Name and Address of Cu		Agent	
4631	DULK, DENIS J SOUTH MOON TRAIL CORANGE EL 22110	Name Denise J. denDulk		

		84 City	ort Orange FL 85 32119				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	. DELETE	1.1 TITLE	President Change Addition				
NAME		1.2 NAME	Arnold C. denDulk				
STREET ADDRESS	· -	1.3 STREET ADDRESS	701 Doris Place				
CITY-ST-ZIP	Super 2	1.4 CITY - \$1 - ZIP	South Daytona, FL 32119				
TATLE	DELETE	2.1 TITLE	Change Addition				
NAME		22 NAME					
STREET ADDRESS		2.3 STREET ADDRESS					
CITY-ST-ZIP		2. 4 CITY - ST - ZIP					
TITLE	☐ DELETE	3.1 TITLE	Change Addition				
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY+ST-ZIP		3.4. City-St-Zip					
TITLE	☐ DELETE	4.1 THLE	☐ Change ☐ Addition				
NAME		4. 2 NAMÉ					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-7IP					
THILE	☐ DELETE	5.1 TillE	Change Addition				
NAME		5.2 NAME					
STREET ADDRESS		53 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY - ST - ZIP					
TITLE	DCLETE DILLETE	6.1 TITLE	Change Addition				
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		6.4 CITY-ST-ZIP					

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 c/q god, or on an attachment with an address.

FILED

Apr 07 1998 8:00am

Secretary of State