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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000081221 (8)

COLLIER COOLING & HEATING CORP.

FILED Jan 20 1998 8:00am Secretary of State



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CR2E034

Mailing Address Principal Place of Business 12023 STEPPINGSTONE BLVD. 12023 STEPPINGSTONE BLVD. TAMPA FL 33635 TAMPA FL 33635 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/18/1997 3100 Part B/A 2. Principal Place of Business Applied For Not Applicable \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees D; nellas 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. ☐ No 10. Name and Address of New Registered Agent Name 81 COLLIER, DALE D 12023 STEPPINGSTONE BLVD. Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33635** 83 84 City 85 | Zip Code 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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE Tale D Ca NAME 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE Eallier Date NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CiTY - ST - ZiP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE 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

WRED

SIGNATURE: