**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P97000081221

1. Corporation Name

COLLIER COOLING & HEATING CORP.

## May 08, 1999 8:00 am Secretary of State

05-08-1999 90031 024 \*\*\*158.75



Principal Plac	e of Business	Mailing Address					1481 <b>00</b> 8111 <b>0010</b> 1 11		11001 3101 1001
8100 PARK BL	VD. BUILDING A	8100 PARK BLVD. BUILDING A	00 PARK BLVD. BUILDING A						
SUITE #38		SUITE #38							
PINELLAS PARK FL 33781 PINELLAS PARK FL 33781 US . US					-	DO NOT WRITE IN THIS SPACE			
		03			1	Date Incorporated or Qualifed 09/18/1997			
2 Principal P	lace of Business	2a. Mailing Address				El Number			olind For
21 /2023			FRAP	Blud	/   "	59-3468563		_ <del> ·</del>	pplied For ot Applicable
21 12023 Steppingstone Blud 26 12023 Steppings Suite, Apt. #, etc. Suite, Apt. #, etc.			io C proce				_/	\$8.75	
22 27					5. 0	Certifcate of Status Desired		Fee Re	
City & State City & State					6. E	Election Campaign Financing		\$5.00	May Be
23 Tax	npa, FC	28 Tampa, 8			ł.	rust Fund Contribution		Added t	
一 Zipクラ	Country	Zip	Country		8. T	his corporation owes the curr			
24  <b>さ</b> ろ	0.35 25 $0.5$	29 <i>3363</i> 3 30	<u> </u>	<u> </u>		Personal Property Tax.		<b>I</b> D Yes	□No
	9. Name and Address of Current	Registered Agent	04		10. P	lame and Address of New I	Registered A	gent	
COL	LIER, DALE D		81	Name					
	23 STEPPINGSTONE BLVD.		82	Street Add	idress (P.C	D. Box Number is Not Accepta	able)		
	PA FL 33635		83						
			63						
			84	City				85 Zip C	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the above	e-named cor	rmoration s	submits this statement for the	nurnose of o	hanging its	registered
office or r	egistered agent, or both, in the State of	Florida. Such change was authorized	orized by	the corporat	ation's boa	rd of directors. I hereby acce	pt the appoin	ment as rec	gistered
Ser was	m familiar with, and accept the obligation	its of, Section 607.0505, Florida	a Statutes	i <b>.</b>					,
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	gistered Ager	nt signature requi	ired when rein	stating)	DATE		
12.	, OFFICERS AND	DIRECTORS	13.		AC	DITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12
TITLE	Р	☐ DELETÉ	1.1 TITLE					☐ Change	☐ Addition
NAME	COLLIER, DALE D		1.2 NAME						
STREET ADDRESS	12023 STEPPINGSTONE BLVD.		1.3 STREET	T ADDRESS					
CITY-ST-ZIP	TAMPA FL 33635		1.4 CITY-S	T-ZIP					
TITLE	T	☐ DELETE	2.1 TITLE					Change	Addition
NAME	COLLIER, KATHRYN J		2.2 NAME						•
STREET ADDRESS	12023 STEPPINGSTONE BLVD		2.3 STREET	ADDRESS					
CITY-ST-ZIP	TAMPA FL 33635		2.4 CITY-S	IT-ZIP		W			
TITLE		☐ DELETE	3.1 TITLE					Change	☐ Addition
NAME			3.2 NAME						1
STREET ADDRESS			3.3 STREET						
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-S	T-ZIP			<del></del>	Change	☐ Addition
NAME		LI DELETE	4.1 TITLE					Change	L_J Addition
			4. 2 NAME	1000000					
STREET ADDRESS			4.3 STREET						
CITY-ST-ZIP TITLE		☐ DÉLETE	4.4 CITY-S' 5.1 TITLE	1-ZIP				Change	☐ Addition
NAME		_ 0222,2	5.1 IIILE 5.2 NAME					ondingo	
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP		ļ	5.4 CITY-S1						}
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME	Ì					
STREET ADDRESS			63 STREET	ADDRESS					
CITY-ST-ZIP		ļ	6.4 CITY-S1	r-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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

- 1 1 mm ER OR DIRECTOR

CR2E034 (11/98)