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Feb 21, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000102688

1. Corporation Name

CLIF BETTS HEATING & COOLING, INC.

Principal Place of Business
1920 PARK MEADOW DR
FORT MYERS FL 33907

Mailing Address
1920 PARK MEADOW DR
FORT MYERS FL 33907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/04/1997

4. FEI Number
65-0391718

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business
21 11866 Metro Parkway
Suite, Apt. #, etc.

2a. Mailing Address
26 11866 Metro Parkway
Suite, Apt. #, etc.

22 City & State
23 Fort Myers FL
Zip Country

27 City & State
28 Fort Myers FL
Zip Country

24 33912 25 LEE

29 33912 30 LEE

9. Name and Address of Current Registered Agent

10. Name and Address of Now Registered Agent

AMASON, GUY H
13161 MCGREGOR BLVD, STE F
FORT MYERS FL 33919

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	BETTS, CLIF	1920 PARK MEADOWS DR FT MYERS FL 33907		<input type="checkbox"/>
VP	BETTS, CHRISTI WHALEY	1920 PARK MEADOWS DR FT MYERS FL 33907		<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
P	BETTS, CLIF	11866 Metro Parkway Fort Myers FL 33912		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP	BETTS, Christi Whaley	11866 Metro Parkway Fort Myers FL 33912		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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: Christi Whaley Betts 1/5/99 941-278-4022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)