

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000004560

1. Entity Name

AIR FIRST COOLING & HEATING OF CENTRAL FLORIDA, *R*

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90008 030 ***400.00
06-23-2000 90106 003 ***150.00

Principal Place of Business

480 S VINELAND ROAD
WINTER GARDEN FL 34787
US

Mailing Address

480 S VINELAND ROAD
WINTER GARDEN FL 34787
US

2. Principal Place of Business

1001 Carter Rd.

3. Mailing Address

1001 Carter Rd.

Suite, Apt. #, etc.

Winter Garden

Suite, Apt. #, etc.

City & State

Winter Garden, FL

City & State

FL

Zip

34787

Country

Orange

Zip

34787

Country

Orange

4. FEI Number

59-3472027

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRITTON, RANDY
13244 LAKE BUTLER BLVD
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **BRITTON, RANDY**
STREET ADDRESS **13244 LAKE BUTLER BLVD**
CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE **VP** ☐ Delete
NAME **BRITTON, CATHI A**
STREET ADDRESS **13244 LAKE BUTLER BLVD**
CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **Britton, Randy**
STREET ADDRESS **6554 Lagoon Ave.**
CITY-ST-ZIP **WINDERMERE, FL 34786**

TITLE **VP** ☒ Change ☐ Addition
NAME **Britton, Cathi A**
STREET ADDRESS **6554 Lagoon Ave.**
CITY-ST-ZIP **WINDERMERE, FL 34786**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-00

Date

(407)
654-7420

Daytime Phone #

CR2E034 (5/00)