**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000044790

1. Corporation Name

ST. JEAN BROTHERS AIR CONDITIONING AND HEATING,

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90138 034 \*\*\*150.00



INC. Principal Place of Business Mailing Address 1803 STELLA CT., N. 1803 STELLA CT., N LAKELAND FL 33813 LAKELAND FL 33813 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 05/14/1998 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Aboue 593515921 Not Applicable Same 21 5ame A3 YPOIL 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt, #, etc. 5. Certificate of Status Desired  $\Box$ Fee R∈quired 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ Added to Fees 28 Trust Fund Contribution 23 Country Zip Country Zip 8. This corporation owes the current year Intangible XNo 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SIMSER, THOMAS A JR 82 Street Address (P.O. Box Number is Not Acceptable) 250 PARK AVE. S., 5TH FLOOR WINTER PARK FL 32789 83 84 City Zip Code FΊ 11. Pursuant to the provisions of Sections 607.050? 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 agen, and title if applicable (NO E. Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition DELETE TITLE 1.1 TITLE ST. JEAN, MICHAEL R 1.2 NAME NAME 1803 STELLA CT., N. 13 STREET ADDRESS STREET ADDRESS LAKELAND FL 33813 1.4 CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition DELETE 2.1 TITLE TITLE ST. JEAN, MATTHEW D 2.2 NAME NAME 4645 LUCE RD. 2.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 33813 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 4.1 TITLE TITLE 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 6.1 TITLE Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

Lent Michael R. St. Jean 4-26-99

CR2E034 (11/98)