

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P98000072144**

1. Entity Name

**EFFICIENCY HEATING AND COOLING, INC.****FILED**  
**Jan 24, 2000 8:00 am**  
**Secretary of State**

01-24-2000 90058 006 \*\*\*150.00

**706345**

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

S. FAULKENBURG ROAD SUITE D-21  
TAMPA FL 33619501 S. FAULKENBURG ROAD SUITE D-21  
TAMPA FL 33619-8037

2. Principal Place of Business

501 S. Faulkenburg Rd.

Suite, Apt. #, etc.

Suite D-21

City &amp; State

Tampa, FL

Zip

33619

Country

USA

3. Mailing Address

501 S. Faulkenburg Rd.

Suite, Apt. #, etc.

Suite D-21

City &amp; State

Tampa, FL 33619-8037

Zip

33619-8037

Country

USA

4. FEI Number

59-3522931

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOODY, TAD

501 S. FAULKENBURG ROAD SUITE D-21  
TAMPA FL 33619

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

*Tad R Moody* *President*

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

(NOTE: Registered Agent signature required when reinstating)

01/13/2000

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete  
NAME MOODY, TAD  
STREET ADDRESS 501 S. FAULKENBURG ROAD SUITE D-21  
CITY-ST-ZIP TAMPA FL 33619TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE V ☐ Delete  
NAME BAUMGARDNER, STEVEN D  
STREET ADDRESS 501 S. FAULKENBURG ROAD SUITE D-21  
CITY-ST-ZIP TAMPA FL 33619TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ST ☐ Delete  
NAME MOODY, TIFFANY G  
STREET ADDRESS 501 SOUTH FAULKENBURG RD.,STED-21  
CITY-ST-ZIP TAMPA FL 33619TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIPTITLE ☐ 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:

*Tiffany G. Moody*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR1/13/00 813-655-8814  
Date Daytime Phone #

CR2E034 (9/99)