

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000094239

1. Entity Name
OCALA HEATING & AIR CONDITIONING, INC.



Principal Place of Business
3695 S.E. 58TH AVENUE
OCALA, FL 34471

Mailing Address
3695 S.E. 58TH AVENUE
OCALA, FL 34471



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3558632

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GILL, S R
613 S.E. FT. KING ST.
OCALA, FL 34471

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
CHAPPEL, NELSON V
3695 S.E. 58TH AVENUE
OCALA, FL 34471

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
CHAPPEL, CHARLES V
3695 S.E. 58TH AVENUE
OCALA, FL 34471

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
ST
CHAPPEL, ELLEN M
3695 S.E. 58TH AVENUE
OCALA, FL 34471

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

000000381224
01/11/06-80045-008 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

NELSON V. CHAPPEL
PRES.

Date

Daytime Phone #

JAN. 10, 2006
352-629-3731