

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90021 029 ***150.00

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

Principal Place of Business
 2843 MERCURY ROAD
 JACKSONVILLE, FL 32207

Mailing Address
 2816 ILENE DR.
 JACKSONVILLE, FL 32216-5094

24012072



02122004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3549808** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

TELLES, MARK C
 2843 MERCURY ROAD
 JACKSONVILLE, FL 32207

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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 | PTD TELLES, MARK C 2816 ILENE DRIVE JACKSONVILLE, FL 32216 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD TELLES, LAURETTA M 2816 ILENE DRIVE JACKSONVILLE, FL 32216 |
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mark C. Telles*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-04 *904-730-8880*
 Date Daytime Phone #