2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2002 8:00 am
Secretary of State
01-25-2002 90019 007 ***150.00

043121 AV

DOCUMENT # **P99000039951**

1. Entity Name
MARC MORRIS AIR CONDITIONING AND REFRIGERATION, INC.

Principal Place of Business	Mailing Address
5618 OAKLAND DRIVE TAMPA FL 33617	5618 OAKLAND DRIVE TAMPA FL 33617

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
318 S. Bahamas Ave.	PO Box 292882
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Temple Terrace, FL	City & State: Temple Terrace, FL
Zip: 33617 ~~33687~~ Country: Hillsborough	Zip: 33687 Country: Hillsborough

4. FEI Number **59-3634743** ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MORRIS, MARCUS A
5618 OAKLAND DRIVE
TAMPA FL 33617

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) 318 S. Bahamas Ave.
City Temple Terrace **FL** Zip Code 33617

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 Marcus a Morris.
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 $150.00
After May 1, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	S MORRIS, RUTH H 5618 OAKLAND DR TAMPA FL 33617 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 318 S. Bahamas Ave Temple Terrace, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MORRIS, MARCUS A 5618 OAKLAND DR TAMPA FL 33617 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 318 S. Bahamas Ave Temple Terrace, FL 33617
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CR2E034 (9/01)

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: Ruth H. Morris (Ruth H. Morris) 1-10-02 813-989-8804
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #