

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000091628

1. Entity Name

SPANN'S HEATING AND AIR CONDITION, INC.



Principal Place of Business

16051 NW 30TH AVE
TRENTON, FL 32693

Mailing Address

16051 NW 30TH AVE
TRENTON, FL 32693

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90043 016 ***150.00



02022005 No Chg-P CR2E034 (10/03)

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4. FEI Number

59-3621302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPANN, JACK E JR.
16051 NW ~~HWY 129~~ *30th ave*
TRENTON, FL 32693

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SPANN, JACK E JR.
STREET ADDRESS	16051 NW 30TH AVE
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	VD
NAME	SPANN, PRENTICE G
STREET ADDRESS	16051 NW 30TH AVE
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Prentice G. Spann *Y.P. Prentice G. Spann* *2/2/05* *3524636440*