

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # S95772**

1. Corporation Name

**STEPP AIR CONDITIONING, REFRIGERATION, AND HEATING SERVICES, INC**

Principal Place of Business

**530 CRYSTAL DRIVE  
MADEIRA BEACH, FL  
33708**

Mailing Address

**7100 CENTRAL AVE  
ST PETERSBURG, FL 33707**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

**THE BURKE COMPANY  
CINDY STEPP  
7100 CENTRAL AVE  
ST PETERSBURG, FL 33707**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and consent to the substance of Section 607.0505, Florida Statutes.

SIGNATURE **CINDY STEPP** PRESIDENT

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

(NOTE: Registered Agent not required when filing a change of registered office only.)

*Cindy Stepp*

3/13/99

12. OFFICERS AND DIRECTORS

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE [Change] [Addition]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [Change] [Addition]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [Change] [Addition]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [Change] [Addition]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [Change] [Addition]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [Change] [Addition]

NAME

STREET ADDRESS

CITY-STATE-ZIP

99 MAR 18 PM 2:23  
STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**01-01-92**

4. FEI Number  
**59-3093566** Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution [ ] **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [X] Yes [ ] No

10. Name and Address of New Registered Agent

800002817616--6  
-03/25/99--01003--021  
\*\*\*\*150.00 \*\*\*\*150.00

14. I hereby certify that the information supplied with this filing is true and correct. I declare under penalty of perjury that the information is true and correct. I am a director or officer of the corporation or the individual business employee authorized to file this report as permitted by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address, with all other filers designated.

SIGNATURE: *Merle E Stepp* MERLE E STEPP 3/5/99

CR2E034 (11/98)