

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V34344** (4)

1. Corporation Name

MORRIS AIR CONDITIONING & HEATING, INC.



Principal Place of Business

**4100 TYNDALE DRIVE
BRANDON FL 33511-7913**

Mailing Address

**4100 TYNDALE DRIVE
BRANDON FL 33511-7918**

2. Principal Place of Business

21 **1501 Alder Way**
Suite, Apt. #, etc.

22 City & State
Brandon, FL

23 Zip Country
33510

2a. Mailing Address

26 **1501 Alder Way**
Suite, Apt. #, etc.

27 City & State
Brandon, FL

28 Zip Country
33510

3. Date Incorporated or Qualified
05/07/1992

3a. Date of Last Report
05/01/1995

4. FET Number

59-3125396

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**MORRIS, JAMES D
4100 TYNDALE DRIVE
BRANDON FL 33511-7913**

10. Name and Address of New Registered Agent

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **MORRIS, JAMES D**
STREET ADDRESS **4100 TYNDALE DRIVE**
CITY-ST-ZIP **BRANDON FL**

TITLE **STD** ☐ DELETE

NAME **MORRIS, BECKY S**
STREET ADDRESS **4100 TYNDALE DRIVE**
CITY-ST-ZIP **BRANDON FL**

TITLE **V** ☐ DELETE

NAME **MORRIS, J RUSSELL**
STREET ADDRESS **4100 TYNDALE DRIVE**
CITY-ST-ZIP **BRANDON FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE ☒ Change ☐ Addition

12 NAME
13 STREET ADDRESS **1501 Alder way**
14 CITY-ST-ZIP **Brandon, FL 33510**

2 1 TITLE ☒ Change ☐ Addition

22 NAME
23 STREET ADDRESS **1501 Alder way**
24 CITY-ST-ZIP **Brandon, FL 33510**

3 1 TITLE ☒ Change ☐ Addition

32 NAME
33 STREET ADDRESS **1501 Alder way**
34 CITY-ST-ZIP **Brandon, FL 33510**

4 1 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

5 1 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

6 1 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James D Morris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96 (813) 689-5171

Date

Daytime Phone #

CR2E034 (12/95)