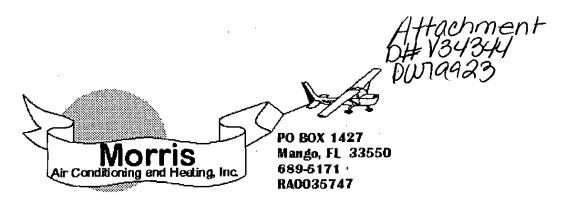
## **2000 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # V34344 Aug 21, 2000 8:00 am Secretary of State 1. Entity Name MORRIS AIR CONDITIONING & HEATING, INC. 08-21-2000 90206 044 \*\*\*150.00 Mailing Address Principal Place of Business 1501 ALDER WAY P. O. BOX 1427 BRANDON FL 33510 MANGO FL 33550 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3125396 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MORRIS, JAMES D Street Address (P.O. Box Number is Not Acceptable) 1501 ALDER WAY **BRANDON FL 33510** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F ☐ Change ☐ Addition TITLE ☐ Delete MORRIS, JAMES D NAME NAME STREET ADDRESS 1501 ALDER WAY STREET ADDRESS CITY-ST-ZIP BRANDON FL 33510 CITY-ST-7IP STD ☐ Addition Change ☐ Delete TITLE TITLE MORRIS, BECKY S NAME STREET ADDRESS 1501 ALDER WAY STREET ADDRESS CITY-ST-ZIP **BRANDON FL** 33510 CITY-ST-ZIP `□ Change Addition TITLE Delete MORRIS J. RUSSELL 2115 DEKLE AVE., NO. B-3 THIS SHOULD NAME NAME NEVER HAVE BEEN STREET ADDRESS STREET ADDRESS REMOVED. TAMPA, FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change TITLE TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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.

Daytime Phone #



August 15, 2000

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

RE:

2000 Uniform Business Report

Document #V34344

Dear Sir or Madam:

I am writing in reference to our Uniform Business Report Document #V34344, enclosed, for the year 2000. It seems we never received the first form that was sent and we didn't realize it until this second notice arrived.

As we have always filed our report well within the allowed time for the first notice and we did not receive the first mailing this year, we are asking for your consideration in accepting our report without penalty. As such, enclosed is our check for \$150. If you find that you cannot accept our report without penalty, please advise us and a check for the difference will be sent.

Thank you for your consideration in this matter.

Sincerely,

James D. Morris

Owner/President

**Jim Morris** 

Specializing Since 1971
In Heating and Air Conditioning
Service & Installation