

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 30, 2007 08:00 AM
Secretary of State

DOCUMENT # V57211

1. Entity Name

R.J. COLLINS AIR CONDITIONING, INC.



Principal Place of Business
1179 ROBIN KAY ROAD
TALLAHASSEE FL 32312
US

Mailing Address
1179 ROBIN KAY ROAD
TALLAHASSEE FL 32312
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

1st MOORE

CR2E034 (10/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0364428**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLLINS, RICHARD J.
1179 ROBIN KAY RD
TALLAHASSEE FL 32312

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and holder - applicable.

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

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be**
Trust Fund Contribution. ☐ **Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	COLLINS, RICHARD J.	
STREET ADDRESS	1179 ROBIN KAY ROAD	
CITY- ST- ZIP	TALLAHASSEE FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	COLLINS, GLORIA J.	
STREET ADDRESS	1179 ROBIN KAY ROAD	
CITY- ST- ZIP	TALLAHASSEE FL	
TITLE	DS	<input type="checkbox"/> Delete
NAME	HANCOCK, SAMUEL	
STREET ADDRESS	8044 YELLOW MOON	
CITY- ST- ZIP	TALLAHASSEE FL 32312	
TITLE	DT	<input type="checkbox"/> Delete
NAME	COLLINS, RAYMOND J.	
STREET ADDRESS	1179 ROBIN KAY ROAD	
CITY- ST- ZIP	TALLAHASSEE FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	U000000611212	
CITY- ST- ZIP	02/02/07-80052-015 150.00	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Richard J. Collins* **RICHARD J. COLLINS**

1/29/2007 **(850) 894-1118**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #