FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # 732345 (4)

1. Corporation Name

AIR CONDITIONING CONTRACTORS ASSOCIATION OF NORT HWEST FLORIDA, INC.

Principal Place of Business	Mailing Address
201 SOUTH "F" STREET PENSACOLA FL 32501	201 SOUTH "F" STREET PENSACOLA FL 32501

3. Date Incorporated or Qualified: 04/03/1975

3a. Date of Last Report: 02/06/1995

4. FEI Number: 59-1602785 ☐ 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

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

GERESCHER, MICHAEL B
201 SOUTH "F" STREET
PENSACOLA FL 32501

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	BROWN, FRANCIS		1.2 NAME	Bill Mayo	
STREET ADDRESS	6771 NORTH PALAFOX STREET		1.3 STREET ADDRESS	4129 N. Davis Hwy.	
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY-ST-ZIP	Pensacola, FL 32503	
TITLE	S	☐ DELETE	2.1 TITLE	S	☒ Change ☐ Addition
NAME	BLACKWELL, BILL		2.2 NAME	Roger Commander	
STREET ADDRESS	1110 NORTH W STREET		2.3 STREET ADDRESS	625 New Warrington Road	
CITY-ST-ZIP	PENSACOLA FL		2.4 CITY-ST-ZIP	Pensacola, FL 32506	
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MILLER, DEWEY		3.2 NAME		
STREET ADDRESS	2110 WEST CERVANTES ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE	D	☒ Change ☐ Addition
NAME	WALMER, FRANK		4.2 NAME	Andy Montaina	
STREET ADDRESS	2071 ATWOOD DRIVE		4.3 STREET ADDRESS	P. O. Box 1151 Bin #231	
CITY-ST-ZIP	PENSACOLA FL		4.4 CITY-ST-ZIP	Pensacola, FL 32520	
TITLE	V	☐ DELETE	5.1 TITLE	V	☒ Change ☐ Addition
NAME	KING, DWAYNE		5.2 NAME	Bob Cooper	
STREET ADDRESS	611 ALABAMA STREET		5.3 STREET ADDRESS	P.O. Box 3656	
CITY-ST-ZIP	MILTON F		5.4 CITY-ST-ZIP	Milton, FL 32572	
TITLE	D	☐ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	MAYO, BILL		6.2 NAME	Joe Barnes	
STREET ADDRESS	4129 NORTH DAVIE HWY		6.3 STREET ADDRESS	80 East 9 Mile Road	
CITY-ST-ZIP	PENSACOLA FL		6.4 CITY-ST-ZIP	Pensacola, FL 32534	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Dewey A. Miller - Treasurer 2/22/96 (904) 434-7110
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)