2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2008 8:00 am
Secretary of State
08-04-2008 90032 020 ****70.00

DOCUMENT # 732345

1. Entity Name
AIR CONDITIONING CONTRACTORS ASSOCIATION OF NORTHWEST FLORIDA, INC.

60046181

Principal Place of Business	Mailing Address
8297 HICKORY HAMMOCK RD MILTON, FL 32583	8297 HICKORY HAMMOCK RD MILTON, FL 32583

07252008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1602785 ☐ Applied For ☐ Not Applicable

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
WINGATE, JONATHON 8297 HICKORY HAMMOCK RD MILTON, FL 32583	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 12, 2008

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, LEONARD 305 W DETROIT BVLD PENSACOLA, FL 32534	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Jimmy Cotton 5888 Saufley Pines Rd Pensacola, FL. 32526	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JONES, DOUG 6745 COMMUNITY DR PENSACOLA, FL 32526	☒ Delete	TITLE P NAME STREET ADDRESS CITY-ST-ZIP	Greg Oliver 14 West Gadsden St. Pensacola, FL. 32501	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, DEWEY 2110 WEST CERVANTES ST. PENSACOLA, FL	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Roger Devalcourt 5555 Bauer Rd. Pensacola, FL. 32507	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP JARMON, MIKE 6373 SIMPSON DR. MILTON, FL 32570	☒ Delete	TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	Ron OBlinger 3900 North "W" St. Pensacola, FL. 32505	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S COTTON, JIMMY 5888 SAUFLEY PINES RD PENSACOLA, FL 32526	☒ Delete	TITLE S NAME STREET ADDRESS CITY-ST-ZIP	Jonathan Wingate 8297 Hickory Hammock Rd Milton, FL. 32583	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WINGATE, JONATHAN 8297 HICKORY HOMMOCK RD. MILTON, FL 32583	☐ Delete	TITLE T NAME STREET ADDRESS CITY-ST-ZIP	Jonathan Wingate 8297 Hickory Hammock Rd. Milton, FL. 32583	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 617, 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: _____ 7-31-08 850-626-0749
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #