


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 19, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000035452 1. Entity Name ACJ HEATING & AIR CONDITIONING, INC.	
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Principal Place of Business 10349 NINA CT NEW PORT RICHEY, FL 34654	Mailing Address 10349 NINA CT NEW PORT RICHEY, FL 34654
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DO NOT WRITE IN THIS SPACE



06112008 No Chg-P CR2E034 (11/05)

4. FEI Number 75-3038701	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 KLIMIS, GEORGE N PA
 2155 ORANGE STR
 TARPON SPRINGS, FL 34689

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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)

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD UNTERWEGER, RICHARD E 10349 NINA CT NEW PORT RICHEY, FL 34654
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MEHURON, THOMAS C 10349 NINA CT NEW PORT RICHEY, FL 34654
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MEHURON, ALAN J 10399 NINA CT. NEW PORT RICHEY, FL 34654
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S UNTERNEGER, RICHARD 12148 MASKED DUCK ROAD BROOKSVILLE, FL 34614
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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U00000953265
 06/19/08-80001-030 150.00

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 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 Unterweger 6.9.08 727.943.9551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone *