

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 713775					
1. Entity Name FLORIDA AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.					
Principal Place of Business 315 MELODY LANE P.O. BOX 180458 CASSELBERRY FL 32707			Mailing Address 315 MELODY LANE P.O. BOX 180458 CASSELBERRY FL 32718		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-1440713	
				☐ 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	
FICARROTTO, JANICE 315 MELODY LANE CASSELBERRY FL 32707				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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006			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	PE	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	STRICKLER, JOE T		NAME	000000416031	
STREET ADDRESS	315 MELODY LANE		STREET ADDRESS	02/11/06-80108-011 61.25	
CITY-ST-ZIP	CASSELBERRY FL 32707		CITY-ST-ZIP		
TITLE	TPP	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	GUZMAN, EMILIO		NAME		
STREET ADDRESS	315 MELODY LANE		STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL 32707		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	STICKLER, SINCLAIR		NAME		
STREET ADDRESS	315 MELODY LANE		STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL 32707-3256		CITY-ST-ZIP		
TITLE	ED	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	FICARROTTO, JANICE		NAME		
STREET ADDRESS	315 MELODY LANE		STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL 32707		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	BECKETT, SUSAN		NAME		
STREET ADDRESS	315 MELODY LANE		STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL 32707		CITY-ST-ZIP		
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	ENGLE, CHRISTIAN		NAME		
STREET ADDRESS	315 MELODY LANE		STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL 32707		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 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: *[Signature]* JANICE FICARROTTO 3/1/2006 3/1/06-221