DOCUMENT# 713775
Entity Name: FLORIDA AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**Current Principal Place of Business:** 

2812 MUNRO STREET TAMPA, FL 33602

# **Current Mailing Address:**

PO BOX 7084 TAMPA, FL 33673

# FEI Number: 59-1440713

Name and Address of Current Registered Agent:

TAMARGO, LISA 2812 MUNRO STREET TAMPA, FL 33602 US Certificate of Status Desired: No

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.

#### SIGNATURE:

Electronic Signature of Registered Agent

# Officer/Director Detail :

••			
Title	DIRECTOR, SECRETARY/TREASURER	Title	DIRECTOR, PRESIDENT
Name	STRICKLER, JOE	Name	CASTELLANO, TOMMY
Address	435 6TH STREET SW	Address	2206 N. ARMENIA AVENUE
City-State-Zip:	WINTER HAVEN FL 33880	City-State-Zip:	TAMPA FL 33607
Title	DIRECTOR, BOARD MEMBER	Title	DIRECTOR, BOARD MEMBER
THE	DIRECTOR, BOARD MEMBER	indo	Birteorori, Borrie memberi
Name	BOWERMEISTER, JAY	Name	SHARKEY, KEVIN
Address	1644 NE 22ND AVENUE #E	Address	7846 SW ELLIPSE WAY
City-State-Zip:	OCALA FL 34470	City-State-Zip:	STUART FL 34997
Title	EXECUTIVE DIRECTOR		
Name	TAMARGO, LISA		
Address	PO BOX 7084		
City-State-Zip:	TAMPA FL 33673		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

# SIGNATURE: TOMMY CASTELLANO

PRESIDENT

04/24/2023

Electronic Signature of Signing Officer/Director Detail

Date

Date