

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02161

Entity Name: POWER AIR CONDITIONING, INC.

Current Principal Place of Business:

1525 N OSPREY AVE
SARASOTA, FL 34236

Current Mailing Address:

1525 N OSPREY AVE
SARASOTA, FL 34236 US

FEI Number: 59-2039373

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CASTIGLIONE, ROBERT P
5537 NOVARA PL
SARASOTA, FL 34238 US

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

Date

Officer/Director Detail :

Title D/VP
Name CASTIGLIONE, ROBERT PD/VP
Address 5537 NOVARA PLACE
City-State-Zip: SARASOTA FL 34238

Title D/P
Name WALLIS, JUSTIN RD/P/T
Address 4716 98TH TERRACE EAST
City-State-Zip: PARRISH FL 34219

Title VP
Name KINSTLE, MICHAEL TVP
Address 6912 123RD AVE NORTH
City-State-Zip: LARGO FL 33773

Title VP
Name POWELL, THOMAS
Address 4953 BROOKEMEADE DRIVE
City-State-Zip: SARASOTA FL 34232

Title S
Name CASTIGIONE, MARILYN S
Address 5537 NOVARO PLACE
City-State-Zip: SARASOTA FL 34238

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUSTIN WALLIS

PRESIDENT

03/18/2014

Electronic Signature of Signing Officer/Director Detail

Date