

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000015497

**FILED**  
**May 25, 2015**  
**Secretary of State**  
**CC1722999706**

**Entity Name:** AIR CONDITIONING SERVICE AND CONTROLS, INC

**Current Principal Place of Business:**

22124 WISE OWL RD  
BROOKSVILLE, FL 34602

**Current Mailing Address:**

22124 WISE OWL RD  
BROOKSVILLE, FL 34602

**FEI Number:** 46-4777897

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WEESE, KARL B  
22124 WISE OWL RD  
BROOKSVILLE, FL 34602 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 P  
Name WEESE, KARL B  
Address 22124 WISE OWL RD  
City-State-Zip: BROOKSVILLE FL 34602

Title VP  
Name GABOR, JOSEPH A  
Address 11814 ROSE LANE  
City-State-Zip: RIVERVIEW FL 33569

Title TREASURER  
Name ROBBINS, RICHARD  
Address 22124 WISE OWL RD  
City-State-Zip: BROOKSVILLE FL 34602

Title SECRETARY  
Name GABOR, MEGAN  
Address 22124 WISE OWL RD  
City-State-Zip: BROOKSVILLE FL 34602

*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:** KARL WEESE

**PRESIDENT**

**05/25/2015**

Electronic Signature of Signing Officer/Director Detail

Date