

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90071 026 ****61.25



DOCUMENT # 710811

1. Entity Name

**AIR CONDITIONING CONTRACTORS ASSOCIATION OF
CENTRAL FLORIDA, INC.**

Principal Place of Business

315 MELODY LANE
P O BOX 180458
CASSELBERRY FL 32707-3256

Mailing Address

315 MELODY LANE
P O BOX 180458
CASSELBERRY FL 32718



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2766734

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 32707-3256

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 re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

TITLE	C	☒ Delete
NAME	GRADY, JIM JR.	
STREET ADDRESS	315 MELODY LANE	
CITY-ST-ZIP	CASSELBERRY FL 32707	
TITLE	P	☒ Delete
NAME	HASTINGS, BRIAN	
STREET ADDRESS	315 MELODY LANE	
CITY-ST-ZIP	CASSELBERRY FL 32707	
TITLE	S	☒ Delete
NAME	WESSON, MARK	
STREET ADDRESS	315 MELODY LANE	
CITY-ST-ZIP	CASSELBERRY FL 32707	
TITLE	T	☒ Delete
NAME	SMITH, ED	
STREET ADDRESS	315 MELODY LANE	
CITY-ST-ZIP	CASSELBERRY FL 32707	
TITLE	D	☐ Delete
NAME	FICARROTTO, JANICE	
STREET ADDRESS	315 MELODY LANE	
CITY-ST-ZIP	CASSELBERRY FL 32707-3256	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	C	☒ Change ☐ Addit
NAME	BRIAN HASTINGS	
STREET ADDRESS	315 W. MELODY LANE	
CITY-ST-ZIP	CASSELBERRY, FL 32707	
TITLE	P	☒ Change ☐ Addit
NAME	PAT AMBROSE	
STREET ADDRESS	315 W. MELODY LANE	
CITY-ST-ZIP	CASSELBERRY, FL 32707	
TITLE	S	☒ Change ☐ Addit
NAME	MARK WESSON	
STREET ADDRESS	315 W. MELODY LANE	
CITY-ST-ZIP	CASSELBERRY, FL 32707	
TITLE	T	☒ Change ☐ Addit
NAME	ED SMITH	
STREET ADDRESS	315 W. MELODY LANE	
CITY-ST-ZIP	CASSELBERRY, FL 32707	
TITLE	T	☒ Change ☐ Addit
NAME	JOHN GREEN	
STREET ADDRESS	315 W. MELODY LANE	
CITY-ST-ZIP	CASSELBERRY, FL 32707	
TITLE		☐ Change ☐ Addit
NAME		
STREET ADDRESS		
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

[Handwritten Signature]