

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733292

FILED
Feb 23, 2006
Secretary of State

Entity Name: PALM BEACH COUNTY ASSOCIATION OF PLUMBING HEATING COOLING CONTRACTORS, INC.

Current Principal Place of Business:

1127 SE 2ND ST.
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

PHCC
POST OFFICE BOX 17752
WEST PALM BEACH, FL 33416 US

New Mailing Address:

FEI Number: 51-0192468 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BUCKLEY, REBECCA
1127 SE 2ND STREET
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: WILDER, LEE
Address: 510 ELDORADO LANE
City-St-Zip: DELRAY BEACH, FL 33444

Title: P () Delete
Name: RICCARDI, EMILIO
Address: P.O. BOX 740160
City-St-Zip: LAKEWORTH, FL 33474

Title: S () Delete
Name: MALKIEL, WARREN
Address: 4848 NW 5TH STREET
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP () Delete
Name: HYSONG, MARK
Address: 518 NORTH
City-St-Zip: LAKEWORTH, FL 33460

Title: D () Delete
Name: RICKENBACH, ERIC
Address: 1003 JUPITER PARK LANE; SUITE #3
City-St-Zip: JUPITER, FL 33458

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILDER, LEE
Address: 510 ELDORADO LANE
City-St-Zip: DELRAY BEACH, FL 33444

Title: T (X) Change () Addition
Name: RICCARDI, EMILIO
Address: P.O. BOX 740160
City-St-Zip: LAKEWORTH, FL 33474

Title: VP (X) Change () Addition
Name: MALKIEL, WARREN
Address: 4848 NW 5TH STREET
City-St-Zip: DELRAY BEACH, FL 33445

Title: P (X) Change () Addition
Name: HYSONG, MARK
Address: 518 NORTH
City-St-Zip: LAKEWORTH, FL 33460

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: SCHOLZ, BRYON
Address: 149 SWAIN AVE.
City-St-Zip: GREENACRES, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK HYSONG

P

02/23/2006

Electronic Signature of Signing Officer or Director

Date