

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02161

FILED  
Feb 01, 2011  
Secretary of State

**Entity Name:** POWER AIR CONDITIONING, INC.

**Current Principal Place of Business:**

1525 N OSPREY AVE  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

**Current Mailing Address:**

1525 N OSPREY AVE  
SARASOTA, FL 34236 US

**New Mailing Address:**

**FEI Number:** 59-2039373

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CASTIGLIONE, ROBERT P  
5537 NOVARA PL  
SARASOTA, FL 34238 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:** D/VP  
**Name:** CASTIGLIONE, ROBERT P D/VP  
**Address:** 5537 NOVARA PLACE  
**City-St-Zip:** SARASOTA, FL 34238

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

**Title:** VP  
**Name:** KINSTLE, MICHAEL T VP  
**Address:** 6912 123RD AVE NORTH  
**City-St-Zip:** LARGO, FL 33773

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

**Title:** S  
**Name:** CASTIGIONE, MARILYN S  
**Address:** 5537 NOVARO PLACE  
**City-St-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:** ROBERT P. CASTIGLIONE

VP

02/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date