

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90177 049 ***158.75

DOCUMENT # G27422

1. Entity Name

WALLACE AIR CONDITIONING & HEATING, INC.



Principal Place of Business

131-16A TOMAHAWK DR.
INDIAN HARBOUR BCH. FL 32937

Mailing Address

Patrick
C/O ~~EMMETT~~ WALLACE
131 16A TOMAHAWK DR.
INDIAN HARBOUR BCH. FL 32937



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-2264335

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WALLACE, EMMETT F
2603 SENATOR WAY
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

Name

WALLACE Patrick J

Street Address (P.O. Box Number is Not Acceptable)

1243 Thallar Lane N.W

Palm Bay

City

FL

Zip Code

32907

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

Patrick J. Wallace

Patrick J. Wallace

2/21/06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DST *P* ☐ Delete
NAME WALLACE, PATRICK J
STREET ADDRESS 1243 THALLAR LANE
CITY-ST-ZIP N.W. PALM BAY FL

TITLE DP ☒ Delete
NAME WALLACE, EMMETT F
STREET ADDRESS 2603 SENATOR WAY
CITY-ST-ZIP MELBOURNE FL 32901
Died 5-30-05

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
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 607, 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:

Patrick J. Wallace

Patrick J. Wallace

321-773-7696

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #