

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # M75252

1. Entity Name
AIR CONSULTING AND ENGINEERING, INC.



Principal Place of Business

**2106 N.W. 67TH PLACE
SUITE 4
GAINESVILLE, FL 32653 US**

Mailing Address

**2106 N.W. 67TH PLACE
SUITE 4
GAINESVILLE, FL 32653 US**

DO NOT WRITE IN THIS SPACE



02232007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2883724

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GAGICH, GLORIA K
2106 NW 67 PL
SUITE 4
GAINESVILLE, FL 32606**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing --
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TS
GAGICH, GLORIA K
2106 NW 67 PL
GAINESVILLE, FL 32653**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
NECK, STEPHEN
2106 NW 67TH PL SUITE 4
GAINESVILLE, FL 32653**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
FICK, DAGMAR
2106 NW 67 PL
GAINESVILLE, FL 32653**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000647979
03/06/07-80093-020 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Gloria K. Gagich **GLORIA K GAGICH** 2/23/07 352 335-1889