

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000863

FILED  
Apr 02, 2007  
Secretary of State

**Entity Name:** NORTH FLORIDA AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

**Current Principal Place of Business:**

P. O. BOX 40107  
JACKSONVILLE, FL 32203 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 40107  
JACKSONVILLE, FL 32203 US

**New Mailing Address:**

**FEI Number:** 59-1689187

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, CARRIE M  
10285 STONINGTON WAY  
JACKSONVILLE, FL 32221 US

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

SIEBEL, JUDI  
8809 KESTREL COURT  
JACKSONVILLE, FL 32222 US

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: JUDITH SIEBEL

04/02/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ADE, JANIE  
Address: P O BOX 8627  
City-St-Zip: JACKSONVILLE, FL 32239 US

Title: T ( ) Delete  
Name: MILLER, ED  
Address: P.O. BOX 16826  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VP ( ) Delete  
Name: PIERSON, CHARLES W  
Address: 2004 JONES RD.  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: D (X) Delete  
Name: GRIFFIN, DAN  
Address: 1000 EDISON AVE  
City-St-Zip: JACKSONVILLE, FL 32204

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WILSON, SCOTT  
Address: 1009 VINE STREET  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: T (X) Change ( ) Addition  
Name: GRIFFIN, JAMES D JR.  
Address: P.O. BOX 37068  
City-St-Zip: JACKSONVILLE, FL 32236 US

Title: VP (X) Change ( ) Addition  
Name: MILLER, ED  
Address: P.O. BOX 16826  
City-St-Zip: JACKSONVILLE, FL 32245 US

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

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: JAMES D GRIFFIN JR

TRES

04/02/2007

Electronic Signature of Signing Officer or Director

Date