2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N50917

Entity Name: BREVARD AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

Current Principal Place of Business:

250 COMMUNITY COLLEGE PKWY
PALM BAY, FL 32909 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 500443
MALABAR, FL 32950 US

New Mailing Address:

FEI Number: 59-3194590 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATTON, JEFFREY D
790 FLETCHER RD SE
SUITE 500
PALM BAY, FL 32909 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:	DVP	( ) Delete
Name:	POWERS, JOE	
Address:	1419 CHAFEE DR., STE. 3	
City-St-Zip:	TITUSVILLE, FL 32780 US	
Title:	DS	( ) Delete
Name:	PATTON, JEFFREY D	
Address:	790 FLETCHER RD SE	
City-St-Zip:	PALM BAY, FL 32909 US	
Title:	DT	( ) Delete
Name:	HENEGHAN, STEPHEN	
Address:	5432 FLINT RD	
City-St-Zip:	COCOA, FL 32927 US	
Title:	DP	( ) Delete
Name:	RAMSEY, CLINT	
Address:	831 KOLN CT NW	
City-St-Zip:	PALM BAY, FL 32907 US	
Title:	D	( ) Delete
Name:	JOHNSON, DAVED	
Address:	6950 VICKIE CIR	
City-St-Zip:	MELBOURNE, FL 32904	
Title:	D	( ) Delete
Name:	SCHMITT, CLIFF	
Address:	10 FRANCIS ST	
City-St-Zip:	COCOA BEACH, FL 32931 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: JEFFREY D PATTON DS 03/23/2009
Electronic Signature of Signing Officer or Director — Date