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FILED
May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000003045 (0)**

1. Corporation Name

GULF COAST AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**5520 DIVISION DRIVE
FT. MYERS FL 33905**

**P.O. BOX 7145
FT MYERS FL 33911**

3. Date Incorporated or Qualified

06/23/1995

4. FEI Number

65-0583348

Applied For

Not Applicable

2. Principal Place of Business

21 PO BOX 7145

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

City & State

23 FORT MYERS FL

City & State

28 FORT MYERS FL

Zip

24 33911

Country

25

Zip

29

Country

30

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GLENNON, JAMES J
5520 DIVISION DRIVE
FT. MYERS FL 33905**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **GLENNON, JAMES J**
STREET ADDRESS **5520 DIVISION DRIVE**
CITY-ST-ZIP **FT. MYERS FL 33905-5012**

TITLE **SD** ☒ DELETE

NAME **TREPANEY, BILL**
STREET ADDRESS **6240 ARC WAY**
CITY-ST-ZIP **N. FT. MYERS FL**

TITLE **VPD** ☒ DELETE

NAME **BOYD, EDWARD**
STREET ADDRESS **2480 HIGHLANDS ROAD**
CITY-ST-ZIP **PORT CHARLOTTE FL**

TITLE **TD** ☐ DELETE

NAME **HARMER, DAVE**
STREET ADDRESS **1036 PINE ISLAND RD**
CITY-ST-ZIP **CAPE CORAL FL**

TITLE **D** ☐ DELETE

NAME **MORGAN, DENNIS**
STREET ADDRESS **5520 DIVISION DRIVE**
CITY-ST-ZIP **FR. MYERS FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☐ Change ☒ Addition

1.2 NAME **George Ellsworth**
1.3 STREET ADDRESS **15304 Fiddlesticks Blvd**
1.4 CITY-ST-ZIP **Fort Myers, FL 33912**

2.1 TITLE **SD** ☐ Change ☒ Addition

2.2 NAME **Joe Nemeth**
2.3 STREET ADDRESS **17450 Caloosa Trace Circle**
2.4 CITY-ST-ZIP **Fort Myers, FL 33912**

3.1 TITLE **VPD** ☐ Change ☒ Addition

3.2 NAME **William Barnes**
3.3 STREET ADDRESS **3071 Juanita Blvd**
3.4 CITY-ST-ZIP **Cape Coral, FL 33993**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME **11732 Lady Anne Circle**
4.3 STREET ADDRESS **Cape Coral, FL 33991**
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME **7131 Golden Eagle #721**
5.3 STREET ADDRESS **Fort Myers, FL 33912**
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Dennis Morgan

4-27-98

(941) 432-1766

CR2E037 (10/97)