## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000124084

Entity Name: GULF TECHNICAL AIR CONDITIONING & APPLIANCE CO.

FILED May 15, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
822 GULF BREEZE PKWY GULF BREEZE, FL 32561				1101 GULF BREEZE PKWY	
				319 GULF BREEZE, FL 32561	
			·	,	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
822 GULF BREEZE PKWY GULF BREEZE, FL 32561			319		
			GULF BREEZE, FL 3	2561	
FEI Number:	30-0216014 FEI Nur	nber Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SAVELLI, JOHN R JR 822 GULF BREEZE PKWY GULF BREEZE, FL 32561 US			1101 GUĹF BREEZE 319	SAVELLI, JOHN R JR 1101 GULF BREEZE PKWY 319 GULF BREEZE, FL 32561 US	
			•		
	named entity submits t of Florida.	nis statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				05/15/2005	
Electronic Signature of Registered Agent			ent	Date	
	ce with s. 607.193(2)(b), F.S npaign Financing Trust Fu		ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PST () Delete SAVELLI, JOHN R III 1164 SANIBEL LN GULF BREEZE, FL 3256	ı	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	V () Delete SAVELLI, JOHN R JR.		Title: Name:	( ) Change ( ) Addition	
Address: City-St-Zip:	3913 PISA DR APT K PANAMA CITY, FL 32405		Address: City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN R SAVELI III PST 05/15/2005