
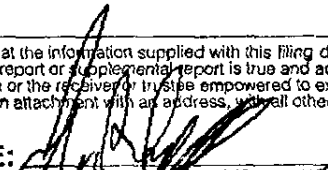


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000124084		
1. Entity Name GULF TECHNICAL AIR CONDITIONING & APPLIANCE CO.		
Principal Place of Business 1101 GULF BREEZE PKWY 319 GULF BREEZE, FL 32561	Mailing Address 1101 GULF BREEZE PKWY 319 GULF BREEZE, FL 32561	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SAVELLI, JOHN R JR 1101 GULF BREEZE PKWY 319 GULF BREEZE, FL 32561		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST SAVELLI, JOHN R III 1164 SANIBEL LN GULF BREEZE, FL 32561	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SAVELLI, JOHN R JR. 3913 PISA DR APT K PANAMA CITY, FL 32405	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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, without other like empowered.		
SIGNATURE: 		4-20-06 Date Daytime Phone #



02272006 No Chg-P CR2E034 (11/05)

4. FEI Number **30-0216014** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

U00000525898
05/04/06-80053-002 150.00

**DO NOT WRITE
IN THIS SPACE**