

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124084

FILED  
Jan 10, 2007  
Secretary of State

**Entity Name:** GULF TECHNICAL AIR CONDITIONING & APPLIANCE CO.

**Current Principal Place of Business:**

1101 GULF BREEZE PKWY  
319  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

1101 GULF BREEZE PKWY  
319  
GULF BREEZE, FL 32561

**New Mailing Address:**

**FEI Number:** 30-0216014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAVELLI, JOHN R JR  
1101 GULF BREEZE PKWY  
319  
GULF BREEZE, FL 32561 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PST ( ) Delete  
**Name:** SAVELLI, JOHN R III  
**Address:** 1164 SANIBEL LN  
**City-St-Zip:** GULF BREEZE, FL 32561

**Title:** V ( ) Delete  
**Name:** SAVELLI, JOHN R JR.  
**Address:** 3913 PISA DR APT K  
**City-St-Zip:** PANAMA CITY, FL 32405

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

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

**Title:** V (X) Change ( ) Addition  
**Name:** SAVELLI, JOHN R JR.  
**Address:** 1143 JENKS AVE  
**City-St-Zip:** PANAMA CITY, FL 32401

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** NATALIE HOWARD

MGR

01/10/2007

Electronic Signature of Signing Officer or Director

Date