

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000018655

Entity Name: A/C SYSTEMS OF JACKSONVILLE INC

FILED  
Jan 07, 2009  
Secretary of State

## Current Principal Place of Business:

1821 MITCHELL AVE.  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

## Current Mailing Address:

1821 MITCHELL AVE.  
JACKSONVILLE, FL 32207

## New Mailing Address:

FEI Number: 20-4188867

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KINSER, PAUL G  
12431 BRIGHTON BAY TRAIL S.  
JACKSONVILLE, FL 32246 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: P ( ) Delete  
Name: LANDERS-KINSER, NILKA  
Address: 12341 BRIGHTON BAY TRAIL S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP ( ) Delete  
Name: SCUDDER, REGINA M  
Address: 2381 COMPANION CIR E  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Delete  
Name: KINSER, PAUL G  
Address: 12341 BRIGHTON BAY TRAIL S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP (X) Delete  
Name: SCUDDER, HIEP J  
Address: 2381 COMPANION CIR E  
City-St-Zip: JACKSONVILLE, FL 32224

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: KINSER, PAUL G  
Address: 12341 BRIGHTON BAY TRAIL S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: STKH (X) Change ( ) Addition  
Name: SCUDDER, HIEP J  
Address: 2381 COMPANION CIR E  
City-St-Zip: JACKSONVILLE, FL 32224

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

SIGNATURE: PAUL G KINSER

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date