

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 244387

FILED  
Apr 10, 2009  
Secretary of State

Entity Name: APPLIANCE ASSOCIATES, INC.

## Current Principal Place of Business:

P.O. BOX 2033  
NARANJA, FL 33032

## New Principal Place of Business:

26595 S. DIXIE HWY  
NARANJA, FL 33032

## Current Mailing Address:

P.O. BOX 2033  
NARANJA, FL 33032

## New Mailing Address:

P.O. BOX2033  
NARANJA,, FL 33032

FEI Number: 59-1733705

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUPPLE, J M  
26595 US #1  
NARANJA, FL 33030 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: SUPPLE, J M  
Address: 26595 US #1  
City-St-Zip: NARANJA, FL 33032

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: J. M. SUPPLE

P

04/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date