2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 463861

City-St-Zip:

ORANGE CITY, FL 32763

Entity Name: ATCHLEY APPLIANCE & TV, INC.

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of B	New Principal Place of Business:	
2225 SO V ORANGE	OLUSIA CITY, FL 32763	B US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	OLUSIA AVE CITY, FL 32763	3 US	2225 SO VOLUSIA ORANGE CITY, FL 32763	US	
FEI Number:	: 59-1559291	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
2225 S VC	, LOREN DEAN DLUSIA AVE CITY, FL 32763				
	named entity su of Florida.	ubmits this statement for the p	ourpose of changing its registered off	ice or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES T	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V () Delete ATCHLEY, LOUIS D, 2225 SO VOLUSIA ORANGE CITY, FL 32763		Title: () C Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	PCD () Delete ATCHLEY, LOREN DEAN 2225 SOUTH VOLUSIA AVE ip: ORANGE CITY, FL 32763		Title: () C Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	V (X) I RUPP, JOHNNIE 2225 SO VOLUS ORANGE CITY, F	IA	Title: () C Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address:	ST () [TOTILLO, PATRI 2225 SO VOLUS		Title: () C Name: Address:	Change () Addition	

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.

City-St-Zip:

SIGNATURE: PATRICIA TOTILLO ST 01/16/2009