

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 644561

FILED
Jan 15, 2009
Secretary of State

Entity Name: MCMULLEN AIR CONDITIONING REFRIGERATION, INC.

Current Principal Place of Business:

4877 28TH ST. N
ST. PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

4877 28TH ST. N
ST. PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 59-1944970 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTI, PETER T.
4877 28TH ST. N
ST. PETERSBURG, FL 33714 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: PD () Delete
Name: CONTI, PETER T.,
Address: 19308 SIMPLICITY PLACE
City-St-Zip: LUTZ, FL 33558

Title: VPT () Delete
Name: CONTI, JOSEPH M
Address: 4500 14TH ST NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: VPS () Delete
Name: BROWN, CURTIS E
Address: 18985 CROOKED LANE
City-St-Zip: TAMPA, FL 33548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BECKY SISSON

_____ Electronic Signature of Signing Officer or Director

CTRL

01/15/2009

_____ Date