

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H18747

FILED  
Mar 09, 2009  
Secretary of State

**Entity Name:** DEPRIEST AIR CONDITIONING & HEATING, INC.

**Current Principal Place of Business:**

342 HWY 17 S.  
E. PALATKA, FL 32131

**New Principal Place of Business:**

**Current Mailing Address:**

342 HWY 17 S.  
E. PALATKA, FL 32131

**New Mailing Address:**

**FEI Number:** 59-2934447

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEPRIEST, BARRY  
7891 A1A SOUTH  
SAINT AUGUSTINE, FL 32080 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: DEPRIEST, JACK  
Address: 342 HWY 17 S.  
City-St-Zip: EAST PALATKA, FL 32131

Title: VD ( ) Delete  
Name: DEPRIEST, BARRY  
Address: 7891 A1A SOUTH  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: ST ( ) Delete  
Name: MICKLER, KAREN  
Address: 133 LOBELIA RD  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: 2V ( ) Delete  
Name: DEPRIEST, STEVEN  
Address: 342 HWY 17 S.  
City-St-Zip: EAST PALATKA, FL 32131

**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:

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:** BARRY DEPRIEST

VD

03/09/2009

Electronic Signature of Signing Officer or Director

Date