

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J44437

FILED
Apr 30, 2008
Secretary of State

Entity Name: ROBINSON FANS SERVICE & EQUIPMENT COMPANY, INC.

Current Principal Place of Business:

4801 COMMERCE DR
TRUSSVILLE, AL 35173 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 707
TRUSSVILLE, AL 351730707 US

New Mailing Address:

FEI Number: 59-2741263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, AL R., JR.
LOPEZ & KELLY P.A.
4600 W. CYPRESS STE. 500
TAMPA, FL 33607 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: BERINGER, PETER,
Address: DRANE FIELD ROAD
City-St-Zip: LAKELAND, FL

Title: VGM () Delete
Name: GANN, GERALD L
Address: COMMERCE DRIVE
City-St-Zip: TRUSSVILLE, AL 35173

Title: DCFO () Delete
Name: BOLLINGER, DOUG
Address: ROBINSON DR
City-St-Zip: ZELIENOPLE, PA

Title: VT () Delete
Name: GUTZWILLER, H. LESLIE
Address: ROBINSON DR.
City-St-Zip: ZELEINOPLE, PA

Title: D () Delete
Name: STAIBLE, CARL
Address: ROBINSON DR.
City-St-Zip: ZELIENOPLE, PA

Title: S () Delete
Name: LOPEZ, AL R JR.
Address: 4600 W. CYPRESS #500
City-St-Zip: TAMPA, FL

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
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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: GERALD L. GANN

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date