2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J44437

FILED Mar 26, 2009 Secretary of State

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

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4801 COMMERCE DR TRUSSVILLE, AL 35173 US					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 707 TRUSSVILLE, AL 351730707 US					
FEI Number: 59-2741263 FEI Number Applied For () FEI Number			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
LOPEZ, AL R., JR. LOPEZ & KELLY P.A. 4600 W. CYPRESS STE. 500 TAMPA, FL 33607 US					
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	t	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E BERINGER, PETI DRANE FIELD RO LAKELAND, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VGM () C GANN, GERALD I COMMERCE DRI TRUSSVILLE, AL	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DCFO () E BOLLINGER, DOI ROBINSON DR ZELIENOPLE, PA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT () E GUTZWILLER, H. ROBINSON DR. ZELEINOPLE, PA		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () D STAIBLE, CARL ROBINSON DR. ZELIENOPLE, PA	velete	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () C LOPEZ, AL R JR. 4600 W. CYPRES TAMPA, FL		Title: Name: Address: City-St-Zip:	() 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					

SIGNATURE: GERALD L. GANN VGM 03/26/2009

above, or on an attachment with an address, with all other like empowered.