

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117504

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** GILLISPIE'S REFRIGERATION AND AIR CONDITIONING, INC.

**Current Principal Place of Business:**

535 BOST ROAD  
WAUCHULA, FL 338734301 US

**New Principal Place of Business:**

**Current Mailing Address:**

535 BOST ROAD  
WAUCHULA, FL 338734301 US

**New Mailing Address:**

**FEI Number:** 65-1157987

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GILLISPIE, MICHAEL E  
535 BOST ROAD  
WAUCHULA, FL 338734301 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: GILLISPIE, MICHAEL E  
Address: 535 BOST ROAD  
City-St-Zip: WAUCHULA, FL 338734301 US

Title: SEC  
Name: GILLISPIE, LYNN M  
Address: 535 BOST RD  
City-St-Zip: WAUCHULA, FL 338734301 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL E GILLISPIE

CEO

01/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date