

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000032702

Entity Name: AIR-WRIGHT HEATING & AIR, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

5625 VERNA BLVD
11
JACKSONVILLE, FL 32205 US

New Principal Place of Business:

Current Mailing Address:

5625 VERNA BLVD
11
JACKSONVILLE, FL 32205 US

New Mailing Address:

FEI Number: 20-4523099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, SAMUEL W
7605 CREST DR N
JACKSONVILLE, FL 32221 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: P () Delete
Name: WRIGHT, SAMUEL W
Address: 7605 CREST DR N
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: V () Delete
Name: WRIGHT, DOROTHY S
Address: 7605 CREST DR N
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: T () Delete
Name: BASIHAN, PAULA J
Address: 7605 CREST DR N
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: S () Delete
Name: LYNN, KELLY A
Address: 869 OAK ARBOR CIR
City-St-Zip: ST AUGUSTINE, FL 32084 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: BASIHAN, PAULA J
Address: 7777 NORMANDY BLVD APT# 1415
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: S (X) Change () Addition
Name: LYNN, KELLY A
Address: 883 OAK ARBOR CIR
City-St-Zip: ST AUGUSTINE, FL 32084 US

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: SAMUEL WRIGHT

P

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date