

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000018099

FILED
Apr 03, 2009
Secretary of State

Entity Name: WASHBURN APPLIANCE & REFRIGERATION, INC.

Current Principal Place of Business:

200 REVSON AVENUE
SEBRING, FL 33876

New Principal Place of Business:

Current Mailing Address:

200 REVSON AVENUE
SEBRING, FL 33876

New Mailing Address:

FEI Number: 26-1986066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT E. LIVINGSTON, P.A.
445 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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: PD () Delete
Name: WASHBURN, TIMOTHY
Address: 200 REVSON AVENUE
City-St-Zip: SEBRING, FL 33876

Title: VP () Delete
Name: WASHBURN, LOTTE
Address: 200 REVSON AVENUE
City-St-Zip: SEBRING, FL 33876

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST () Change (X) Addition
Name: WASHBURN, LOTTE
Address: 200 REVSON AVE.
City-St-Zip: SEBRING, FL 33876

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: LOTTE WASHBURN

VP

04/03/2009

Electronic Signature of Signing Officer or Director

Date