

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # P08639

1. Entity Name
REPUBLIC REFRIGERATION INCORPORATED



Principal Place of Business
**2890 GRAY FOX ROAD
MONROE, NC 28110**

Mailing Address
**2890 GRAY FOX ROAD
MONROE, NC 28110**



04092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-1375898

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CTD
NAME	SAYE, HENRY A.
STREET ADDRESS	8100 RAINTREE LANE
CITY-ST-ZIP	CHARLOTTE, NC 28277
TITLE	S
NAME	HELMS, RODNEY L
STREET ADDRESS	4425 WEDDINGTON RD
CITY-ST-ZIP	MONROE, NC 28110
TITLE	V
NAME	BELANGER, ROBERT
STREET ADDRESS	4509 WAYHAY FARMS ROAD
CITY-ST-ZIP	WAXHAW, NC 28173
TITLE	P
NAME	TEETER, WALTER
STREET ADDRESS	1380 FRENCH BELK ROAD
CITY-ST-ZIP	MOUNT ULLA, NC 28125
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/07/08-80083-019 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Henry A. Saye

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/08
Date

(704) 282-0399
Daytime Phone #