

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000005757

Entity Name: AIR SUPPLY, INC.

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3167 COASTAL HWY  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

44 ROSE STREET  
SOPCHOPPY, FL 32358

**Current Mailing Address:**

3167 COASTAL HWY  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

P.O. BOX 312  
SOPCHOPPY, FL 32358

FEI Number: 59-3430874

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUSSELL, RICHARD R JR.  
332 ROSE STREET  
SOPCHOPPY, FL 32358 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: PT  
Name: RUSSELL, RICHARD R JR  
Address: 332 ROSE STREET  
City-St-Zip: SOPCHOPPY, FL 32358

Title: VS  
Name: RUSSELL, LISA M  
Address: 332 ROSE STREET  
City-St-Zip: SOPCHOPPY, FL 32358

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: LISA M RUSSELL

VS

04/11/2012

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

\_\_\_\_\_  
Date