

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S91826

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: AIR CONDITIONING DEPOT, INC.

**Current Principal Place of Business:**

8926 N. ARMENIA AVE.  
TAMPA, FL 33604 US

**New Principal Place of Business:**

**Current Mailing Address:**

15425 LAKE MAGDALENE BLVD  
TAMPA, FL 33613 US

**New Mailing Address:**

FEI Number: 59-3218469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUSSELL, SUSAN PST  
15425 LAKE MAGDALENE BLVD  
TAMPA, FL 33613 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: PST ( ) Delete  
Name: RUSSELL, SUSAN PST  
Address: 15425 LAKE MAGDALENE BLVD  
City-St-Zip: TAMPA, FL 33613

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: SUSAN RUSSELL

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01/19/2009

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

\_\_\_\_\_  
Date