

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 849633

FILED
Jul 31, 2009
Secretary of State

Entity Name: FABCO-AIR, INC.

Current Principal Place of Business:

3716 NE 49TH AVENUE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

3716 NE 49TH AVENUE
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-2118021 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: SCHMIDT, WILLIAM R
Address: 3716 NE 49 AVENUE
City-St-Zip: GAINESVILLE, FL

Title: D () Delete
Name: STUBBS, MICHAEL B
Address: 777 3RD AVE 18TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: MARKS, PIERCE JR.
Address: 91 BRISTLECONE COURI
City-St-Zip: AUGUSTA, GA 30909

Title: STD () Delete
Name: EDWARDS, LOUIS
Address: 1156 LULLWATER ROAD
City-St-Zip: ATLANTA, GA 30307

Title: D () Delete
Name: RILEY, WILLIAM
Address: 444 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: WILLIAM R SCHMIDT

Electronic Signature of Signing Officer or Director

PRES

07/31/2009

_____ Date