

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000134210

**FILED**  
**Jul 20, 2009**  
**Secretary of State**

**Entity Name:** O'BRIEN HEATING AND AIR CONDITIONING INC

**Current Principal Place of Business:**

2076 BLACKFOOT TRAIL  
SAINT CLOUD, FL 34771 US

**New Principal Place of Business:**

1673 SLASH PINE PLACE  
OVIEDO, FL 32765 US

**Current Mailing Address:**

2076 BLACKFOOT TRAIL  
SAINT CLOUD, FL 34771 US

**New Mailing Address:**

1673 SLASH PINE PLACE  
OVIEDO, FL 32765 US

FEI Number: 61-1433701

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

O'BRIEN, MATTHEW J  
2076 BLACKFOOT TRAIL  
SAINT CLOUD, FL 34771 US

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

O'BRIEN, MATTHEW J  
1673 SLASH PINE PLACE  
OVIEDO, FL 32765 US

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: MATTHEW O'BRIEN

07/20/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: O'BRIEN, MATTHEW J  
Address: 2076 BLACKFOOT TRAIL  
City-St-Zip: SAINT CLOUD, FL 34771

Title: VS ( ) Delete  
Name: O'BREIN, MELANIE D  
Address: 2076 BLACKFOOT TRAIL  
City-St-Zip: SAINT CLOUD, FL 34771

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

Title: PT (X) Change ( ) Addition  
Name: O'BRIEN, MATTHEW J  
Address: 1673 SLASH PINE PLACE  
City-St-Zip: OVIEDO, FL 32765

Title: VS (X) Change ( ) Addition  
Name: O'BREIN, MELANIE D  
Address: 1673 SLASH PINE PLACE  
City-St-Zip: OVIEDO, FL 32765

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: MATTHEW O'BRIEN

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07/20/2009

Electronic Signature of Signing Officer or Director

Date