

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000047495

FILED
Oct 12, 2007
Secretary of State

Entity Name: MCABEE'S HVAC INSTALLATION INC.

Current Principal Place of Business:

904 SYDNEY DOVER RD.
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

904 SYDNEY DOVER RD.
DOVER, FL 33527

New Mailing Address:

FEI Number: 20-0851544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDEN LAKE BUSINESS SERVICES INC
4314 BARRET AVE
PLANT CITY, FL 33566 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: DAVE DURLAND

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: P () Delete
Name: MCABEE, TIMMY L
Address: 904 SYDNEY RD
City-St-Zip: PLANT CITY, FL 33527

Title: SEC () Delete
Name: MCABEE, CHRISTOPHER L
Address: 904 SYDNEY DOVER RD
City-St-Zip: PLANT CITY, FL 33527

Title: VP () Delete
Name: MCABEE, BILLY
Address: 904 SYDNEY DOVER RD
City-St-Zip: PLANT CITY, FL 33527

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:

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: TIMMY MCABEE

Electronic Signature of Signing Officer or Director

P

10/12/2007

Date