

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000018010

FILED
Nov 30, 2009
Secretary of State

Entity Name: ASAP AIR CONDITIONING & HEATING, INC.

Current Principal Place of Business:

1352 CORONET DRIVE
DELTONA, FL 32725 US

New Principal Place of Business:

Current Mailing Address:

1352 CORONET DRIVE
DELTONA, FL 32725 US

New Mailing Address:

FEI Number: 26-4716005 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SHINGLEDECKER, JILL
1352 CORONET DRIVE
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

SHINGLEDECKER, JILL M
1352 CORONET DRIVE
DELTONA, FL 32725 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: JILL SHINGLEDECKER 11/30/2009

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: PD () Delete
Name: SHINGLEDECKER, JILL
Address: 1352 CORONET DRIVE
City-St-Zip: DELTONA, FL 32725 US

Title: VP () Delete
Name: CARVELLI, DOMINICK
Address: 1352 CORONET DRIVE
City-St-Zip: DELTONA, FL 32725 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHINGLEDECKER, JILL M
Address: 1352 CORONET DRIVE
City-St-Zip: DELTONA, FL 32725 US

Title: VP (X) Change () Addition
Name: CARVELLI, DOMINICK S
Address: 1352 CORONET DRIVE
City-St-Zip: DELTONA, FL 32725 US

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: JILL SHINGLEDECKER PD 11/30/2009

Electronic Signature of Signing Officer or Director Date