

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F60389

**FILED**  
**Nov 08, 2010**  
**Secretary of State**

**Entity Name:** GLACIER AIR CONDITIONING, INC.

**Current Principal Place of Business:**

250 LAKE DRIVE  
COCONUT CREEK, FL 33066

**New Principal Place of Business:**

**Current Mailing Address:**

250 LAKE DRIVE  
COCONUT CREEK, FL 33066

**New Mailing Address:**

**FEI Number:** 59-2152630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COOKSON, DOREEN  
250 LAKE DRIVE  
COCONUT CREEK, FL 33066 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:** DOREEN COOKSON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** VST  
**Name:** COOKSON, DOREEN  
**Address:** 250 LAKE DRIVE  
**City-St-Zip:** COCONUT CREEK, FL 33066

**Title:** P  
**Name:** COOKSON, CHARLES  
**Address:** 260 LAKE DR.  
**City-St-Zip:** COCONUT CREEK, FL 33066

I hereby 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 all other like empowered.

**SIGNATURE:** CHARLES COOKSON

PRES

11/08/2010

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

\_\_\_\_\_  
Date