## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F97000001630  1. Entity Name								
R.H. MCRAE'S ELECTRICAL CONTRACTORS, INC.						F	FILED	
128 INDUST	e of Business	R.	Mailing Address 128 INDUSTRAIL PARK	INDUSTRAIL PARK DR.		05 MAR 15 PM 3: 27 SECRETARY OF STATE		
ROCKINGHAM, NC 28379 ROCKINGHAM, NC 28379					 		ASSEE TEORINA Marketini interna	
2. Principal P	Pinels	• \ \ \.	3. Mailing Address	releigh	Ave III			
Suite, Apt. #, etc.			Suite, Apt. #, etc.		0314200		CR2E098 (6/04)	
City & State  Rockingham, NC  Zip  Country			City & State Rockingly	Country NC	4. FEI Nur 56-18	nber 343259	Applied For Not Applicable	
		and Address of Current	Zip 083719 Registered Agent	ŭs		ate of Status Desired	\$8.75 Additional Fee Required	
CORPORATE ACCESS 236 EAST 6TH AVE. TALLAHASSEE, FL 32303					Name			
					Street Address (P.O. Box Number is Not Acceptable)			
				City		<u> </u>	Zip Code	
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  In accordance with s. 607.193(2)(b), F.S., the								
~. <b>r</b>	LE NOW!!!	FEE IS \$300.00			corporation did not	receive the prior notice.		
10. TITLE	PDC	OFFICERS AND	DIRECTORS Delete	11. TITLE	Secretary	7 - 2	RS AND DIRECTORS IN 11  Change Addition	
NAME	1	CHARD H	Delicie	NAME	David L.	(6) Frank	Egi change	
STREET ADDRESS CITY-ST-ZIP		STRAIL PARK DR. HAM, NC 28379		STREET ADDRESS CITY-ST-ZIP	132 Pirelia Bockington	an Allenie		
TITLE	S		Delete	TITLE	Treasurer	70C 28379 - (T)	Change Audition	
NAME Street address		/, HOLMES E STRAIL PARK DR.		NAME Street Address	Dernis C	. Loftus		
CITY-ST-ZIP		HAM, NC 28379		CITY-ST-ZIP	- Rocking	gh Avenue 28 hom, NC 28	379	
title Name	VDC	AVED	Delete	TITLE NAME		7 .	☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP	128 INDWTRIKE PARK DR. STP			STREET ADDRESS CITY-ST-ZIP	100048982911 03/23/0501014005 **308.75			
TITLE NAME			☐ Delete	TITLE NAME			☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP	- Comme	LOTATER.	ERRY DU-X	
TITLE			☐ Delete	TITLE	F 19 - 17 (	DO INCLES	Change Addition	
NAME Street address				NAME Street address				
CITY-ST-ZIP TITLE			☐ Delete	CITY-ST-ZIP TITLE			Change Addition	
NAME Street Address				NAME Street address				
CITY-ST-ZIP	ertify that the	information supplied with	this filing does not qualify fo	CITY-ST-ZIP  the exemption sta	ited in Section 119.07(	3)(i), Florida Statutes. I furt	ther certify that the information	
indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								
SIGNATURE: Time Date District OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR  SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR  Date District Phone #								