

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K39069

Entity Name: MIKE SCOTT PLUMBING, INC.

FILED  
Oct 24, 2008  
Secretary of State

## Current Principal Place of Business:

10988 SW 94 CT.  
OCALA, FL 34481 US

## New Principal Place of Business:

668 E OVERDRIVE CIRCLE  
HERNANDO, FL 34442 US

## Current Mailing Address:

10988 SW 94 CT.  
OCALA, FL 34481 US

## New Mailing Address:

668 E OVERDRIVE CIRCLE  
HERNANDO, FL 34442 US

FEI Number: 59-2912358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCOTT, PATRICIA  
10988 S.W. 94TH COURT  
OCALA, FL 32676 US

## Name and Address of New Registered Agent:

SCOTT, PATRICIA  
668 E OVERDRIVE CIRCLE  
HERNANDO, FL 34442 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: PATRICIA SCOTT

10/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SCOTT, MICHAEL  
Address: 14200 W SEASIDE CT  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: STD ( ) Delete  
Name: SCOTT, PATRICIA  
Address: 14200 W SEASIDE CT.  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: VP ( ) Delete  
Name: SCOTT, SHAWN  
Address: 3590 N WAGON PT  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: VP ( ) Delete  
Name: HINDE, TRACY  
Address: 2939 N EDWARDS ISL PT  
City-St-Zip: HERNANDO, FL 34442

Title: VP ( ) Delete  
Name: SCOTT, JASON  
Address: 2985 MUSTANG BLVD  
City-St-Zip: BEVERLY HILLS, FL 34465

## 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:

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: PATRICIA SCOTT

STD

10/24/2008

Electronic Signature of Signing Officer or Director

Date