

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000033445

FILED
Apr 19, 2005
Secretary of State

Entity Name: THOMPSONS AIR CONDITIONING, INC.

Current Principal Place of Business:

4280 -A JAMES ST
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

27147 DEL PRADO PARKWAY
PUNTA GORDA, FL 33983

Current Mailing Address:

4280 -A JAMES ST
PORT CHARLOTTE, FL 33980

New Mailing Address:

2200 KINGS HIGHWAY, 3L #64
PORT CHARLOTTE, FL 33980

FEI Number: 52-2241697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMPSON, TIMOTHY
2297 HARBOUR DR
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

THOMPSON, TIMOTHY
2297 HARBOUR DR
PUNTA GORDA, FL 33893 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: TIMOTHY THOMPSON

04/19/2005

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: PV () Delete
Name: THOMPSON, ANNA
Address: 22577 LAIKA AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: THOMPSON, ANNA
Address: 2297 HARBOUR DR.
City-St-Zip: PUNTA GORDA, FL 33983

Title: PRES () Change (X) Addition
Name: THOMPSON, TIMOTHY
Address: 2297 HARBOUR DR.
City-St-Zip: PUNTA GORDA, FL 33983

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY THOMPSON

PRES

04/19/2005

Electronic Signature of Signing Officer or Director

Date