


2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P00000037790		
1. Entity Name DENNY CLARKE HEATING & AIR CONDITIONING, INC.		

FILED
04 OCT 28 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 15 BRAMBLEWOOD LANE ORMOND BEACH, FL 32174	Mailing Address 15 BRAMBLEWOOD LANE ORMOND BEACH, FL 32174
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2. Principal Place of Business 200 Tomoka Ave	3. Mailing Address 200 Tomoka Ave
Suite, Apt. #, etc. Unit D	Suite, Apt. #, etc. Unit D
City & State Ormond Beach, FL	City & State Ormond Beach, FL
Zip 32174	Country

10252004 REIN-P CR2E098 (6/04)

4. FEI Number 59-3639136	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CLARKE, DENNIS E 15 BRAMBLEWOOD LANE ORMOND BEACH, FL 32174	
7. Name and Address of New Registered Agent Name Clarke, Dennis E Street Address (P.O. Box Number is Not Acceptable) 200 Tomoka Ave Unit D City Ormond Beach FL Zip Code 32174	

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLARKE, DENNIS E 15 BRAMBLEWOOD LANE ORMOND BEACH, FL 32174 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200 Tomoka Ave Unit D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700042281967 10/28/04--01034--022 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>[Signature]</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 179.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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: *[Signature]* **10-25-04-386-671-1029**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Division of Corporations
P. O. Box 6327
Tallahassee, Fl. 32314

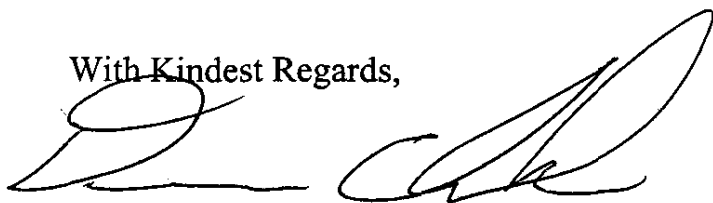
Dear Sir/Madam:

Please be advised that I am in the process of a divorce. The original mailing address has changed and the new address has been changed on the attached form.

Please consider this filing fee and reinstatement my corporation.

Thank you very much for your assistance in this matter.

With Kindest Regards,

A handwritten signature in dark ink, appearing to be 'Denny Clarke', written over a horizontal line.

Denny Clarke
Heating & Air Conditioning, Inc.