

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000027209

FILED
Feb 24, 2005
Secretary of State

Entity Name: PIERCE HEATING & COOLING, INC.

Current Principal Place of Business:

2004 JUNIPER AVE.
PORT ST. LUCIE, FL 32456

New Principal Place of Business:

743 FOURTH STREET
PORT ST. JOE, FL 32457

Current Mailing Address:

2004 JUNIPER AVE.
PORT ST. LUCIE, FL 32456

New Mailing Address:

PO BOX 36
PORT ST. JOE, FL 32457

FEI Number: 04-3626762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCE, BRENT
2004 JUNIPER AVE.
PORT ST. LUCIE, FL 32456 US

Name and Address of New Registered Agent:

PIERCE, BRENT
PORT ST. JOE
PORT ST. JOE, FL 32457 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: BRENT PIRECE

02/24/2005

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: D () Delete
Name: PIERCE, BRENT
Address: 2004 JUNIPER AVE
City-St-Zip: PORT SAINT JOE, FL 32456

Title: D () Delete
Name: PIERCE, RHONDA
Address: 2004 JUNIPER AVE.
City-St-Zip: PORT ST. LUCIE, FL 32456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PIERCE, BRENT
Address: PO BOX 36
City-St-Zip: PORT SAINT JOE, FL 32457

Title: D (X) Change () Addition
Name: DANIELS, LEMMOND
Address: PO BOX 36
City-St-Zip: PORT ST. JOE, FL 32457

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: BRENT PIRECE

D

02/24/2005

Electronic Signature of Signing Officer or Director

Date