## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000000073

Entity Name: ACME EQUIPMENT COMPANY

FILED Oct 04, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1024 CONCERT AVE	15424 FLIGHT PATH DRIVE

SPRING HILL, FL 34609

15424 FLIGHT PATH DRIVE
BROOKSVILLE, FL 34604

Current Mailing Address: New Mailing Address:

1024 CONCERT AVE. 15424 FLIGHT PATH DRIVE SPRING HILL, FL 34609 BROOKSVILLE, FL 34604

FEI Number: 55-0809832 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FREKEY, EDWARD H
6195 FREEPORT DR.
SPRING HILL, FL 346081017 US

ROBINSON, TIM
4436 COMMERCIAL WAY
SPRING HILL, FL 34606 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: TIM ROBINSON 10/04/2005

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition HOFFMAN, RICHARD HOFFMAN, MARYANN Name: Name: 1024 CONCERT AVE. 1024 CONCERT AVE. Address: Address: City-St-Zip: SPRING HILL, FL 34609 City-St-Zip: SPRING HILL, FL 34609

Title: TD () Delete Title: () Change () Addition Name: SHAPPELL. DAVID Name:

Address: 18532 CEDARBROOK CT. Address: City-St-Zip: HUDSON, FL 34667 City-St-Zip:

Title: ( ) Delete Title: SC ( ) Change (X) Addition

 Name:
 Name:
 HOFFMAN, RICHARD

 Address:
 Address:
 1024 CONCERT AVE

 City-St-Zip:
 City-St-Zip:
 SPRING HILL, FL 34609

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: DAVID SHAPPELL TD 10/04/2005