

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000009945

Entity Name: B & G COMPRESSOR SERVICE INC

FILED
Dec 22, 2004
Secretary of State

Current Principal Place of Business:

5103 WILLOWBROOK LANE
LAKELAND, FL 33811 US

New Principal Place of Business:

4355 US HWY 92 EAST
LAKELAND, FL 33801 US

Current Mailing Address:

5103 WILLOWBROOK LANE
LAKELAND, FL 33811 US

New Mailing Address:

4355 US HWY 92 EAST
LAKELAND, FL 33801 US

FEI Number: 71-0928940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMICKLE, GARY P
5103 WILLOWBROOK LANE
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

MCMICKLE, GARY P
4355 US HWY 92 EAST
LAKELAND, FL 33801 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: GARY P MCMICKLE

12/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCMICKLE, GARY P
Address: 5103 WILLOWBROOK LANE
City-St-Zip: LAKELAND, FL 33811 US

Title: VP () Delete
Name: CLARK, WILLIAM M
Address: 125 OWEN CIRCLE SOUTH
City-St-Zip: AUBURNDAL, FL 33823 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCMICKLE, GARY P
Address: 5568 DEERE TRACKS COURT
City-St-Zip: LAKELAND, FL 33811 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARY P MCMICKLE

P

12/22/2004

Electronic Signature of Signing Officer or Director

Date