2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED DOCUMENT # P04000161963 1. Entity Name 08 MAY 27 AM 9: 26 MYERS HEATING & COOLING, INC. SECRETARY OF STATE TALLAHASSEE, FLOPIDA Principal Place of Business Mailing Address 252 GATES CREEK ROAD 252 GATES CREEK ROAD BRADENTON, FL 34212 US BRADENTON, FL 34212 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 09282007 CR2E098 (1/07) REIN-P City & State Applied For City & State 4. FEI Number 59-3790096 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FLECK, JOHN P JR. Street Address (P.O. Box Number is Not Acceptable) 1111 9TH AVENUE WEST SUITE C BRADENTON, FL 34205 City Zip Code e of changin 8. The above named entity submits this statement for the purpo tered office ogregistered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$750.00 After January 1, 2008, Fee will be 5 90.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. P/D TITLE Defete TITLE ☐ Change ☐ Addition MYERS, DAVID S 600119140786 229708--01043--014 ***90 NAME NAME STREET ADDRESS 252 GATES CREEK ROAD STREET ADDRESS BRADENTON, FL 34212 CITY-ST-ZIP CITY-ST-ZIP JITI F ☐ Delete TITLE Change Addition NAME WHITEHURST, ROBERT W NAME STREET ADDRESS 2308 PALM AVENUE STREET ADDRESS CITY-ST-ZIP SEFFNER, FL 33584 CITY-ST-ZIP **VPS** TITLE ☐ Delete □/Change / TITLE NAME MYERS, STEPHEN J NAME STREET ADDRESS 252 GATES CREEK RD STREET ADDRESS Clir-Si-zm BRADENTON; FL 34212 CITY-SI-ZIP_ TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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. Dand 941 -746-0042 1/11/08 SIGNATURE:

Daytime Ptione #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR