

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED  
AND  
FILED

DOCUMENT # P05000118046

1. Entity Name  
RABID DOG CONSULTING, INC.



JAN 30 AM 8:29

Principal Place of Business  
826 HAULOVER DR  
ALTAMONTE SPRINGS, FL 32714

Mailing Address  
826 HAULOVER DR  
ALTAMONTE SPRINGS, FL 32714

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1-30-08

2. Principal Place of Business - No P.O. Box #  
2944 Ashwood Court  
Suite, Apt. #, etc.

3. Mailing Address  
2944 Ashwood Court  
Suite, Apt. #, etc.



REINSTATEMENT 01-08

City & State  
Apopka, Florida  
Zip  
32703  
Country  
USA

City & State  
Apopka, Florida  
Zip  
32703  
Country  
USA

4. FEI Number  
NOT APPLICABLE  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REDELL, MAUREEN M  
826 HAULOVER DR  
ALTAMONTE SPRINGS, FL 32714

7. Name and Address of New Registered Agent

Name  
Maureen McHale

Street Address (P.O. Box Number is Not Applicable)  
2944 Ashwood Court

City  
Apopka  
FL  
Zip Code  
32703

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  
Maureen McHale

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-21-08

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
REDELL, MAUREEN M  
826 HAULOVER DR  
ALTAMONTE SPRINGS, FL 32714 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Maureen McHale  
2944 Ashwood Court  
Apopka, FL 32703 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 life empowered.

SIGNATURE  
Maureen McHale

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-21-08 352-406-2011