

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000150124

**FILED**  
**Oct 21, 2009**  
**Secretary of State**

**Entity Name:** EXECUTIVE AIR CONDITIONING OF THE PALM BEACHES & TREASURE COAST INC.

**Current Principal Place of Business:**

1902 SW SUSSET LANE  
PORT SAINT LUCIE, FL 34953 US

**New Principal Place of Business:**

**Current Mailing Address:**

1902 SW SUSSET LANE  
PORT SAINT LUCIE, FL 34953 US

**New Mailing Address:**

**FEI Number:** 90-0252283      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

TRAYWICK, ROSEMARIE  
1902 SW SUSSET LANE  
PORT ST. LUCIE, FL 34953 US

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

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:** ROSEMARIE TRAYWICK

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:** DIR ( ) Delete  
**Name:** TRAYWICK, ROSEMARIE  
**Address:** 1902 SW SUSSET LANE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953 US

**Title:** DIR ( ) Delete  
**Name:** TRAYWICK, ANDREW D JR.  
**Address:** 1902 SW SUSSET LANE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PRES (X) Change ( ) Addition  
**Name:** TRAYWICK, ROSEMARIE  
**Address:** 1902 SW SUSSET LANE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953 US

**Title:** VP (X) Change ( ) Addition  
**Name:** TRAYWICK, ANDREW D JR.  
**Address:** 1902 SW SUSSET LANE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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:** ROSEMARIE TRAYWICK

Electronic Signature of Signing Officer or Director

PRES

10/21/2009

Date