

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000166378

Entity Name: A GOOD LOCKSMITH, INC.

**FILED**  
**Oct 25, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

24700 CARNOUSTIE COURT  
BONITA SPRINGS, FL 34135

## **New Principal Place of Business:**

9844 ROUNDSTONE CIRCLE  
FORT MYERS, FL 33967

## **Current Mailing Address:**

PO BOX 367781  
BONITA SPRINGS, FL 34136

## **New Mailing Address:**

FEI Number: 20-3977601

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WANDERON, THOMAS  
809 WALKERBILT ROAD  
5  
NAPLES, FL 34110 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: THOMAS WANDERON

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: P,T ( ) Delete  
Name: GALDINE, MICHAEL C JR.  
Address: 24700 CARNOUSTIE COURT  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP,S (X) Delete  
Name: SUMMERS, RANDY  
Address: 24700 CARNOUSTIE COURT  
City-St-Zip: BONITA SPRINGS, FL 34135

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

Title: DPST (X) Change ( ) Addition  
Name: GALDINE, MICHAEL C JR.  
Address: 9844 ROUNDSTONE CIRCLE  
City-St-Zip: FORT MYERS, FL 33967

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

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: MICHAEL C. GALDINE JR

P

10/25/2007

Electronic Signature of Signing Officer or Director

Date