

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000034457

FILED
Oct 08, 2009
Secretary of State

Entity Name: SNOWMAN REFRIGERATED EXPRESS INC

Current Principal Place of Business:

6400 S. HWY. 314-A
OCKLAWAHA, FL 32179 US

New Principal Place of Business:

Current Mailing Address:

6400 S. HWY. 314-A
OCKLAWAHA, FL 32179 US

New Mailing Address:

FEI Number: 26-2326423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HYDE, THOMAS W
16775 SE 27TH PLACE ROAD
OCKLAWAHA, FL 32179 US

Name and Address of New Registered Agent:

HYDE, WILLIAM E III
6400 S. HWY. 314-A
OCKLAWAHA, FL 32179 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: WILLIAM E. HYDE III

10/08/2009

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 () Delete
Name: HYDE, THOMAS W
Address: 16775 SE 27TH PLACE ROAD
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: VP () Delete
Name: HYDE, THOMAS W II
Address: 10298 CHADWICK AVENUE
City-St-Zip: ENGLEWOOD, FL 34224 US

Title: S () Delete
Name: HYDE, WILLIAM E III
Address: 6400 S. HWY. 314-A
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: T () Delete
Name: HYDE, DONNA J
Address: 16775 SE 27TH PLACE ROAD
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: D () Delete
Name: STOLETZ, ROBERT S
Address: 1323 36TH STREET W.
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HYDE, THOMAS W
Address: 343 COLD SPRINGS ROAD
City-St-Zip: CHILHOWIE, VA 24319 US

Title: VP (X) Change () Addition
Name: HYDE, THOMAS W II
Address: 343 COLD SPRINGS ROAD
City-St-Zip: CHILHOWIE, VA 24319 US

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

Title: T (X) Change () Addition
Name: HYDE, DONNA J
Address: 343 COLD SPRINGS ROAD
City-St-Zip: CHILHOWIE, VA 24319 US

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: WILLIAM E. HYDE III

S

10/08/2009

Electronic Signature of Signing Officer or Director

Date