### PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR REINSTATEMENT



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood

DOCUMENT # P98000072144

1. Corporation Name

EFFICIENCY HEATING AND COOLING, INC.

Principal Place of Business

Mailing Address

10124 WOODBERRY RD

10124 WOODBERRY RD

FILED

03 OCT 15 AM 8:40

SECHETARY OF STATE TALLAHASSEE, FLORIDA

TAMPA FL 33	3013		IAMPA PL 33	0013		REIN	STATEME	03	
If above ad	idresses are i	incorrect in any way, line th	rough incorrect i	information a	and enter correction below.	-			
2. New Prin	cipal Office A	Address, If Applicable	3. New Mail	ling Office Address, If Applicable		4. Date Incorporated or Qualified			
Suite, Apt. #, etc.			Suite, Apt. #,	Suite, Apt. #, etc.			08/17/1998  5. FEI Number Applied For		
City & State City & St				ite		59-3522931 Not Applicable			
Zip		Country	Zip		Country	6. CERTIFICAT	E OF STATUS DESIRED	8.75 Additional Fee required for a Certificate of Status	
7. Names ar	nd Street Ado	fresses of Each Officer and	l/or Director (Flo	orida nonprof	fit corporations must list at le	ast 3 directors)	<u></u>		
Title(s) Name of Officers and/or Directors				Street Address of Each Officer and/or Director			City / State / Zip		
P	MOODY, TAD			10124 WOODBERRY RD		TAMPA FL 33619			
<del>- 10</del>	M <del>OCOY, DEFANY</del> -G			501"SOUTH FAULKENBURG RD:,STED-2			TAMPA FL 33619		
		9				90 10/15/	1 <mark>00238052</mark> /0301022009	<b>≥69</b> ***150.00	
						0. Nome and			
8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent			
MOODY, TAD 10124 WOODBERRY RD					Name Street Address (P.O. Box Number is Not Acceptable)			100000000000000000000000000000000000000	
TAMPA FL 33619				Suite, Apt. #, Etc.			-   8		
					City		Sta <b>F</b> 1		
10. I, being a Signature of Registered A		registered agent of the ab	1		CUERED	bligations of Sec	Date 10/06/17	05, F.S.	

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

#### 1 Pag

## EFFICIENCY HEATING & COOLING, INC. 10124 WOODBERRY RD. TAMPA, FL. 33619 1800-211-5116

October 06, 2003

To Whom it may concern,

I have not received two notices concerning the Annual report filling this year: I did not receive the notices last year either. Could you please verify my address in your computer so that I will not have this problem.

Sincerely.

Tad K, Moody - President