

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# V33845

Entity Name: CHEM/GUARD, INC.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

3420 BUFFAM PLACE
CASSELBERRY, FL 32707 US

New Principal Place of Business:

3964 BUGLERS REST PLACE
CASSELBERRY, FL 32707 US

Current Mailing Address:

3420 BUFFAM PLACE
CASSELBERRY, FL 32707 US

New Mailing Address:

P.O. BOX 182258
CASSELBERRY, FL 32718 US

FEI Number: 59-3143699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCULLOUGH, DAVID H.
3420 BUFFAM PLACE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

MCCULLOUGH, DAVID H DIRECTO
3964 BUGLERS REST
CASSELBERRY, FL 32707 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: DAVID H. MCCULLOUGH

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCCULLOUGH, DAVID H.
Address: 3420 BUFFAM PLACE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE (X) Change () Addition
Name: MCCULLOUGH, DAVID H DIRECTO
Address: BUGLERS REST PLACE
City-St-Zip: CASSELBERRY, FL 32707

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: DAVID H. MCCULLOUGH

DIRE

04/23/2009

Electronic Signature of Signing Officer or Director

Date