

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000001010

FILED  
Oct 08, 2007  
Secretary of State

Entity Name: LIBERTY HEATING & AIR CONDITIONING, INC.

**Current Principal Place of Business:**

540 CROFTON PARK LANE  
FRANKLIN, TN 37069

**New Principal Place of Business:**

**Current Mailing Address:**

540 CROFTON PARK LANE  
FRANKLIN, TN 37069

**New Mailing Address:**

FEI Number: 61-1449278      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DOBBINS, STEVE  
7437 PARK SPRINGS CIRCLE  
ORLANDO, FL 32835 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: DOBBINS, STEVE

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: CHRM ( ) Delete  
Name: MOSS, DON  
Address: 540 CROFTON PARK LANE  
City-St-Zip: FRANKLIN, TN 37068

Title: P ( ) Delete  
Name: MOSS, DON  
Address: 540 CROFTON PARK LANE  
City-St-Zip: FRANKLIN, TN 37068

Title: STD ( ) Delete  
Name: MOSS, PEGGYE  
Address: 540 CROFTON PARK LANE  
City-St-Zip: FRANKLIN, TN 37068

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

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

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

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: DON MOSS

Electronic Signature of Signing Officer or Director

MR.

10/08/2007

Date