

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 05, 2007
Secretary of State

DOCUMENT# P09693

Entity Name: EXPRESS SERVICES, INC.

Current Principal Place of Business:

8516 NW EXPRESSWAY
OKLAHOMA CITY, OK 73162

New Principal Place of Business:

Current Mailing Address:

8516 NW EXPRESSWAY
OKLAHOMA CITY, OK 73162

New Mailing Address:

FEI Number: 84-0909680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: SHARON K PATRIC

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: CCEO () Delete
Name: FUNK, ROBERT A.,
Address: 8516 NW EXPRESSWAY
City-St-Zip: OKLAHOMA CITY, OK 73162

Title: VCD () Delete
Name: STOLLER, WILLIAM,
Address: 8516 NW EXPRESSWAY
City-St-Zip: OKLAHOMA CITY, OK 73162

Title: VPDS () Delete
Name: RICHARDS, THOMAS N.,
Address: 8516 NW EXPRESSWAY
City-St-Zip: OKLAHOMA CITY, OK 73162

Title: V () Delete
Name: HANEBOG, LINDA
Address: 8516 NW EXPRESSWAY
City-St-Zip: OKLAHOMA CITY, OK 73162

Title: V () Delete
Name: LANE, CAROL
Address: 8516 NW EXPRESSWAY
City-St-Zip: OKLAHOMA CITY, OK 73162

Title: V () Delete
Name: GUNDERSON, THOMAS
Address: 8516 NW EXPRESSWAY
City-St-Zip: OKLAHOMA CITY, OK 73162

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:

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: SHARON K PATRIC

Electronic Signature of Signing Officer or Director

VP

10/05/2007

Date