2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000001941

Entity Name: MEDIASPAN GROUP, INC.

FILED Nov 11, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
620 DAVIS DRIVE SUITE 220 MORRISVILLE, NC 27560				333 JACKSON PLAZA ANN ARBOR, MI 48103			
Current Mailing Address:				New Mailing Address:			
P.O. BOX 97308 RALEIGH, NC 27624			333 JACKSON PLAZA ANN ARBOR, MI 48103				
FEI Number: 56-2256332 FEI Number Applied For () FEI Number			mber Not Applicable () Certificate of Status Desired ()				
Name and	Address of Cu	Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: FLORENCE MERCERON							
	Electronic	Signature of Registered Agent	t			ļ	Date
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$			
Title: Name: Address: City-St-Zip:	CEO () [CAMPAGNONI, F 620 DAVIS DRIV MORRISVILLE, N	E, SUITE 220		Title: Name: Address: City-St-Zip:	CEO (X) CAMPAGNONI, 333 JACKSON I ANN ARBOR, M	FRANK PLAZA	() Addition
Title: Name: Address: City-St-Zip:	S ()[OWEN, WILLIAM 620 DAVIS DRIV MORRISVILLE, N	E, SUITE 220		Title: Name: Address: City-St-Zip:	S (X) OWEN, WILLIAI 333 JACKSON I ANN ARBOR, M	M H PLAZA	() Addition
Title: Name: Address: City-St-Zip:	D () E CAMPAGNONI, F 620 DAVIS DRIV MORRISVILLE, N	E, SUITE 220		Title: Name: Address: City-St-Zip:	D (X) CAMPAGNONI, 333 JACKSON I ANN ARBOR, M	FRANK PLAZA	() Addition
Title: Name: Address: City-St-Zip:	D ()E MILLER, NORVE 620 DAVIS DRIV MORRISVILLE, N	E, SUITE 220		Title: Name: Address: City-St-Zip:	D (X) MILLER, NORVI 333 JACKSON I ANN ARBOR, M	ELL PLAZA	() Addition
Title: Name: Address: City-St-Zip:	D () E LLOYD, DAVID 620 DAVIS DRIV MORRISVILLE, N			Title: Name: Address: City-St-Zip:	D (X) LLOYD, DAVID 33 JACKSON PI ANN ARBOR, M	LAZA	() Addition
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	D () ROBERTS, DAN 333 JACKSON F ANN ARBOR, M	I PLAZA	X) Addition

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: DAN ROBERTS **EVP** 11/11/2008