

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000002797

Entity Name: RICKJOHN, INC.

FILED  
Feb 29, 2008  
Secretary of State

**Current Principal Place of Business:**

717 REAMER DR  
CARNEGIE, PA 15106

**New Principal Place of Business:**

**Current Mailing Address:**

717 REAMER DR  
CARNEGIE, PA 15106

**New Mailing Address:**

FEI Number: 25-1444027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GAMMIERE, SARAH  
100 BERMUDA BAY CIRCLE  
SUITE 103  
PONTE VEDRA BEACH, FL 32082 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: SARAHANN GAMMIERE

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: P ( ) Delete  
Name: GAMMIERE, RICHARD E  
Address: 717 REAMER DR  
City-St-Zip: CARNEGIE, PA 15106

Title: VP ( ) Delete  
Name: WALLO, ROBERT J  
Address: 100 BERMUDA BAY CIR SUITE 103  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: ST ( ) Delete  
Name: GAMMIERE, SARAHANN  
Address: 717 REAMER DR  
City-St-Zip: CARNEGIE, PA 15106

**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: SARAHANN GAMMIERE

ST

02/29/2008

Electronic Signature of Signing Officer or Director

Date