2007 FOR PROFIT CORPORATION

ANNUAL REPORT (AR) DOCUMENT # F05000001455

1. Entity Name

ONE CALL LOCATORS, LTD. CORPORATION



FILED Mar 12, 2007 8:00 am Secretary of State 03-12-2007 90087 044 ***150.00

							14119					
Principal Place	of Business	Mailin	Mailing Address									
4500 MAJESTIC DRIVE			P.O.	P.O. BOX 16780								
MISSOULA MT 59808			MISS	MISSOULA MT 59808								
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2. Principal Pla		3. Mail	3. Mailing Address									
1111 E. BROADWAY												
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				1st MOORE CR2E034 (10/06)				
MISSOULA								•		O	. (
City & State			City	City & State				4. FEI Num	ber 81-05295	90		Applied For
MONTANA									81-05295	ου	<u>-</u>	Not Applicable
Zip Country			Zip	Zip Count				5 O			\$8.75 A	dditional
Zip 59802 Country USA						5. Certificate of S		e of Status Desired		Fee Requi		
6. Name and Address of Current I			nt Registere	Registered Agent				7. Name and Address of New Registered Agent				
			Name				- , ,,,.		·			
C T CORPORATION SYSTEM												
1200 SOUTH PINE ISLAND ROA			OAD	\D Street Address				(P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324				<u> </u>								
												•
						City			·		Zip Co	ode
										F	_	
		submits this statement	for the purp	ose of changing its	registero	ed office or	registore	ed agent, or b	oth, in the State of	Florida. Lan	n familiar witl	h, and accept
the obligatio	ons of registe	ered agent.										ĺ
SIGNATURE s	Signature, typed	or printed name of registered age	ont and title it app	Ircable. (NOT	E: Registere	J Agent signati	ure required	when reinstating)		DATE		
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		! FEE IS \$150.00							9. Election Cam	paign Finan	icing \$5	.00 May Be
After N	Mav 1. 200	7 Fee Will Be \$550.0	ا nn								~ -	
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12. I hereby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attactment with an address, with all other like empowered.

SIGNATURE: