2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 08, 2007
Secretary of State

DOCUMENT# F06000002558

Entity Name: CENTRAL ARKANSAS PAYROLL COMPANY

Current Principal Place of Business:

1 SHACKEL FORD DRIVE, SUITE 400
LITTLE ROCK, AR 72211

New Principal Place of Business:

Current Mailing Address:

1 SHACKEL FORD DRIVE, SUITE 400
LITTLE ROCK, AR 72211

New Mailing Address:

FEI Number: 74-2517189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: CORPORATION SERVICE COMPANY
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: CP ( ) Delete
Name: MORTON, LARRY E
Address: 1 SHACKEL FORD DRIVE, SUITE 400
City-St-Zip: LITTLE ROCK, AR 72211

Title: DV ( ) Delete
Name: FESS, GREGORY E
Address: 1 SHACKEL FORD DRIVE, SUITE 400
City-St-Zip: LITTLE ROCK, AR 72211

Title: DS ( ) Delete
Name: CHASTAIN, EMILIA
Address: 1 SHACKEL FORD DRIVE, SUITE 400
City-St-Zip: LITTLE ROCK, AR 72211

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: EMILIA CHASTAIN VP 10/08/2007
Electronic Signature of Signing Officer or Director Date