

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F07000005653

**FILED**  
**Dec 05, 2013**  
**Secretary of State**

**Entity Name:** PACESETTER CLAIMS SERVICE INC.

**Current Principal Place of Business:**

2511 N. HWY 167  
CATOOSA, OK 74015

**New Principal Place of Business:**

2871 N. HWY 167  
CATOOSA, OK 74015

**Current Mailing Address:**

P.O. BOX 472107  
TULSA, OK 74147

**New Mailing Address:**

P.O. BOX 2130  
CATOOSA, OK 74015 27

**FEI Number:** 73-1533956

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KORHONEN, ALAN  
6745 PHILLIPS INDUSTRIAL BLVD STE 2  
JACKSONVILLE, FL 32256 US

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

CHANEY, WILLIAM  
230 SATELLITE AVE  
SATELLITE, FL 32937 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: WILLIAM CHANEY

12/05/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: BRASSFIELD, WILLIAM L  
Address: 2871 N. HWY 167  
City-St-Zip: CATOOSA, OK 74015

Title: SVP  
Name: BROWN, STAN  
Address: 2871 N. HWY 167  
City-St-Zip: CATOOSA, OK 74015

Title: PRES  
Name: BRASSFIELD, DALE SR  
Address: 2511 N. HWY 167  
City-St-Zip: CATOOSA, OK 74015

Title: SVP  
Name: COLEMAN, BARRY  
Address: 2871 N. HWY 167  
City-St-Zip: CATOOSA, OK 74015

I hereby 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 all other like empowered.

SIGNATURE: BARRY COLEMAN

SVP

12/05/2013

Electronic Signature of Signing Officer or Director

Date