

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F95000000590

Entity Name: CASM, INC.

FILED
Sep 30, 2005
Secretary of State

Current Principal Place of Business:

5520 TECH CENTER DRIVE
SUITE 200
COLORADO SPRINGS, FL 80919 US

Current Mailing Address:

5520 TECH CENTER DRIVE
SUITE 200
COLORADO SPRINGS, FL 80919 US

FEI Number: 92-0134879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

5540 TECH CENTER DRIVE
SUITE 201
COLORADO SPRINGS, CO 80919 US

New Mailing Address:

5540 TECH CENTER DRIVE
SUITE 201
COLORADO SPRINGS, CO 80919 US

Name and Address of Current Registered Agent:

SCHWARTZ, GERALD
BUILDING M6-138
ROOM 116
KENNEDY SPACE CENTER, FL 32899 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: GERALD SCHWARTZ

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: PCEO () Delete
Name: BAILEY, JOHN JR
Address: 5520 TECH CENTER DRIVE, SUITE 200
City-St-Zip: COLORADO SPRINGS, CO 80919 US

Title: DIR (X) Delete
Name: SCHWALIER, CHARLES
Address: 5520 TECH CENTER DRIVE, SUITE 200
City-St-Zip: COLORADO SPRINGS, CO 80919 US

Title: DIR (X) Delete
Name: HEIM, CHARLES E
Address: 5520 TECH CENTER DRIVE, SUITE 200
City-St-Zip: COLORADO SPRINGS, CO 80919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCOO (X) Change () Addition
Name: SCHWALIER, CHARLES
Address: 5540 TECH CENTER DRIVE, SUITE 201
City-St-Zip: COLORADO SPRINGS, CO 80919 US

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 for the exemption stated in Section 119.07(3)(i), 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: CHARLES SCHWALIER

PCOO

09/30/2005

Electronic Signature of Signing Officer or Director

Date