

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 14, 2009  
Secretary of State**

DOCUMENT# P04000075193

Entity Name: PAGEMASTERS ELECTRICAL INC

**Current Principal Place of Business:**

45102 MUSSLEWHITE RD  
CALLAHAN, FL 32011

**New Principal Place of Business:**

**Current Mailing Address:**

45102 MUSSLEWHITE RD  
CALLAHAN, FL 32011

**New Mailing Address:**

FEI Number: 20-1101258      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PAGE, TIMOTHY K  
45102 MUSSLEWHITE RD  
CALLAHAN, FL 32011      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: TIMOTHY K PAGE

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: PAGE, TIMOTHY K  
Address: 45102 MUSSLEWHITE RD  
City-St-Zip: CALLAHAN, FL 32011

Title: V ( ) Delete  
Name: PAGE, CURTIS E  
Address: 8654 PINE PARK DR  
City-St-Zip: JACKSONVILLE, FL 32219

Title: T ( ) Delete  
Name: PAGE, ADAM C  
Address: 45102 MUSSLEWHITE RD  
City-St-Zip: CALLAHAN, FL 32011

Title: S ( ) Delete  
Name: PAGE, CODY R  
Address: 45102 MUSSLEWHITE  
City-St-Zip: CALLAHAN, FL 32011

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: PAGE, CURTIS E  
Address: 45106 MUSSLEWHITE RD  
City-St-Zip: CALLAHAN, FL 32011

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: TIMOTHY K PAGE

Electronic Signature of Signing Officer or Director

P

10/14/2009

Date