

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000049354

Entity Name: ARGOTRAK, INC.

**FILED**  
**Dec 05, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

4522 EXECUTIVE DR  
202  
NAPLES, FL 34119

**New Principal Place of Business:**

2590 NORTHBROOKE PLAZA DR  
205  
NAPLES, FL 34119

**Current Mailing Address:**

4522 EXECUTIVE DR  
202  
NAPLES, FL 34119

**New Mailing Address:**

2590 NORTHBROOKE PLAZA DR  
205  
NAPLES, FL 34119

FEI Number: 27-0313568

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WHEELER, JAMES M  
2447 HARBOR ROAD  
NAPLES, FL 34104 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: JAMES M WHEELER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CFO  
Name: WHEELER, JAMES M  
Address: 2447 HARBOR ROAD  
City-St-Zip: NAPLES, FL 34104 US

Title: PRES  
Name: WHEELER, JAMES A  
Address: 8528 LAUREL LAKES BLVD.  
City-St-Zip: NAPLES, FL 34119 US

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: JAMES M WHEELER

CFO

12/05/2014

Electronic Signature of Signing Officer or Director

Date