2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000025626

Entity Name: NATIONAL LAND SURVEYING CO.

FILED May 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

621 24TH AVE SW 2316 N. INTERSTATE DRIVE NORMAN, OK 73069 US NORMAN, OK 73072

Current Mailing Address: New Mailing Address:

P O BOX 1394 NORMAN, OK 73070

FEI Number: 73-1538353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

STROM, EARL LEWIS, JEFF 15502 RACETRACK ROAD 5265 EAST BAY DRIVE UNIT 424 ODESSA, FL 35556 CLEARWATER, FL 33764

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: JEFF LEWIS

05/16/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

621 24TH AVE SW

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition OUTLAND, ROBERT F Name:

OUTLAND, ROBERT F PO BOX 1394 Address: NORMAN, OK 73069 City-St-Zip: NORMAN, OK 73070

Title: PD Title: PD () Delete (X) Change () Addition

DRAGG, DONALD R Name: STROM, EARL Name: 15502 RACETRACK RD 2119 SADDLEBACK BLVD. Address: Address: NORMAN, OK 73072 City-St-Zip: ODESSA, FL 35556 City-St-Zip:

() Delete Title: Title: VΡ (X) Change () Addition OUTLAND, R. CRAIG LEWIS, JEFF Name: Name:

3004 MARIGOLD TRAIL 1030 CRUCE Address: Address: City-St-Zip: NORMAN, OK 73072 City-St-Zip: NORMAN, OK 73069

Title: () Delete Title: ST (X) Change () Addition

MORRISON, J. KEITH LEWIS, JEFF Name: Name: Address: 10000 GERONIMO DR Address: 1030 CRUCE City-St-Zip: City-St-Zip: NORMAN, OK 73026 NORMAN, OK 73069

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD R. DRAGG PD 05/16/2006