2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 17, 2006
Secretary of State

DOCUMENT# P98000107567

Entity Name: REIKER ENTERPRISES OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

% PASS & SEYMOUR
50 BOYD AVENUE
SYRACUSE, NY 13209 US

New Principal Place of Business:

Current Mailing Address:

C/O LEGRAND NORTH AMERICA
60 WOOD LAWN CT
WEST HARTFORD, CT 06110 US

New Mailing Address:

% PASS & SEYMOUR
50 BOYD AVENUE
SYRACUSE, NY 13209 US

FEI Number: 59-3559455 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CT CORPORATION

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: GAMBINO, MICHAEL
Address: 50 BOYD AVENUE
City-St-Zip: SYRACUSE, NY 13209 US

Title: T ( ) Delete
Name: BIELEFIELD, DOUGLAS
Address: 60 WOODLAWN ST
City-St-Zip: WEST HARTFORD, CT 06110 US

Title: S ( ) Delete
Name: CLARKE, JOHN
Address: 50 BOYD AVE
City-St-Zip: SYRACUSE, NY 13209

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition
Name: LAPERRIERE, JAMES
Address: 60 WOODLAWN ST
City-St-Zip: WEST HARTFORD, CT 06110 US

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

Title: V ( ) Change (X) Addition
Name: JULIAN, ROBERT
Address: 60 WOODLAWN ST
City-St-Zip: WEST HARTFORD, CT 06110 US

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: JOHN CLARKE S 10/17/2006

Electronic Signature of Signing Officer or Director — Date