

# 2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000003920

FILED  
Jul 11, 2012  
Secretary of State

**Entity Name:** NATIONAL SALVAGE & SERVICE CORPORATION

**Current Principal Place of Business:**

6755 OLD STATE ROAD 37 SOUTH  
BLOOMINGTON, IN 47401

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 300  
CLEAR CREEK, IN 47426

**New Mailing Address:**

FEI Number: 35-1741803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SIMMERMAN, KELVIN  
1812 CHERRYWOOD LANE  
DUNEDIN, FL 34698 US

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

SCRAMEK, KATIE AS  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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: KATIE SCRAMEK

07/11/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: OVP  
Name: SCHOPP, CURTIS C  
Address: 6755 OLD STATE ROAD 37 SOUTH  
City-St-Zip: BLOOMINGTON, IN 47401

Title: OP  
Name: SCHOPP, VICTORIA  
Address: 6755 OLD STATE ROAD 37 SOUTH  
City-St-Zip: BLOOMINGTON, IN 47401

Title: ST  
Name: HARDIN, NSA  
Address: 6755 OLD STATE ROAD 37 SOUTH  
City-St-Zip: BLOOMINGTON, IN 47401

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: VICTORIA SCHOPP

OVP

07/11/2012

Electronic Signature of Signing Officer or Director

Date