

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000003379

FILED
Oct 19, 2009
Secretary of State

Entity Name: PROMARK UTILITY LOCATORS, INC.

Current Principal Place of Business:

11640 ARBOR STREET
SUITE 200
OMAHA, NE 68144

New Principal Place of Business:

Current Mailing Address:

11640 ARBOR STREET
SUITE 200
OMAHA, NE 68144

New Mailing Address:

FEI Number: 54-1796488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: CRAIG CHRISTIANSON

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: KARAM, ROB P
Address: 11640 ARBOR STREET #200
City-St-Zip: OMAHA, NE 68144 US

Title: VP () Delete
Name: JOHNSON, BRIAN R VP
Address: 11640 ARBOR STREET #200
City-St-Zip: OMAHA, NE 68144 US

Title: VP () Delete
Name: JOHNSON, MICHAEL G VP
Address: 11640 ARBOR STREET #200
City-St-Zip: OMAHA, NE 68144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MICHAEL G JOHNSON

CFO

10/19/2009

Electronic Signature of Signing Officer or Director

Date