

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

05 MAR -7 AM 9:29

LIMITED PARTNERSHIP REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT #

1. Name of Limited Partnership

DAIRICONCEPTS, L.P.

B03000000156

REINSTATEMENT 04-05

2. Principal Office Address

3253 E. Chestnut Expwy.

Suite, Apt. #, etc.

City & State

Springfield, MO

Zip
65802-2540

Country
Greene

3. Mailing Office Address

3253 E. Chestnut Expwy.

Suite, Apt. #, etc.

City & State

Springfield, MO

Zip
65802

Country
Greene

4. Date Formed or Registered To Do Business in Florida

4/23/03

5. FEI Number

43-1883248

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7a. Capital Contributions as shown on Record:

0

7b. Amount of Capital Contributions in FLORIDA to date:

0

8. Name and Address of Current Registered Agent

Name

C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

FEEES:

- 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
 - 2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.
 - 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.
- Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
DairiConcepts Management, L.L.C.	3253 E. Chestnut Expwy.	Springfield, MO 65802	B03000000156
<p>200048437912 03/15/05--01059--001 **641.25</p>			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

By: *David A. Geisler* Managing Member

DATE 11/3/04

Typed or Printed Name of General Partner Signing Form

David A. Geisler, Corp. VP/Legal

Telephone Number

(816) 801-6440

CR2E038 (10/02)

Having been named as registered agent and to accept service of process for DairiConcepts, L.P. at the place herein designated:

CT Corporation System
c/o CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent for in Chapter 608, F.S.

Dated: November 4, 2004

CT Corporation System
By: John J. Linnihan
John J. Linnihan, Asst. Vice President

Having been named as registered agent and to accept service of process for DairiConcepts, L.P. at the place herein designated:

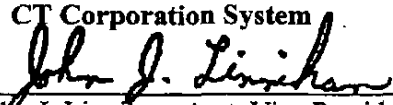
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Dated: November 4, 2004

CT Corporation System

By:



John J. Linnihan, Asst. Vice President