

APR 11-2008 12:51

Division of Corporations

F04000006562

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Florida Department of State
Division of Corporations
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Division of Corporations

Fax Number : (850) 617-6380

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REGISTERED AGENT CHANGE

FOOD TEAM, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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H080000138633

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Missouri in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Food Team, Inc.
2. The principal office address: 1007 North Main St., Columbia, IL 62236
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/15/2004 Document number: F04000006562
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

WILLIAM TIMMONS
4907 YACHT CLUB DR
TAMPA FL 33616
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Business Filings Incorporated
1203 Governors Square Blvd, Suite 101
(P.O. Box or personal mailbox NOT acceptable)
Tallahassee, Florida 32301-2960

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Samuel Knight
(Signature of an officer, chairman or vice chairman of the board)

Samuel Knight, Secretary
(Printed or typed name and title)

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Mark Williams
(Signature of Registered Agent)

4/8/08
(Date)

If signing on behalf of an entity:

Mark Williams
(Typed or Printed Name)

AVP
(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
 DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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