


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT 2014-2015		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 650613			
1. Corporation Name Pennington Farms, Inc.			
2. Principal Office Address - No P.O. Box # 7200 Carousel Ln <small>Suite, Apt. #, etc.</small>		3. Mailing Office Address same <small>Suite, Apt. #, etc.</small>	
City & State Ft. Myers Fla.		City & State (blank)	
Zip 33966	Country USA	Zip 33966	Country Lee
4. Date Incorporated or Qualified To Do Business in Florida 1979		5. FEI Number 59-1967505	
6. CERTIFICATE OF STATUS DESIRED		\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name Frances Ann Pennington			
Street Address (P.O. Box Number is Not Acceptable) 7200 Carousel Ln			
City, State, Zip Ft Myers Fla			
City Ft Myers		State FL	Zip Code 33966
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.			
Signature of Registered Agent Frances Ann Pennington		Date 4/11/15	
REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Frances Ann Pennington	7200 Carousel Ln	Ft. Myers, Fla 33966
Sec	Frances Ann Pennington	"	"
Treas	Frances Ann Pennington	"	"
enclosed 900.-			
10. E-mail Address: AnnPFInc@yahoo.com <small>(To be used for future annual report notification)</small>			
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.			
SIGNATURE: Frances Ann Pennington		Date 4/11/15	Daytime Phone # 239 850 2085

K. ASHTON