

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F19330

Entity Name: RIFE'S MARKET, INC.

FILED
Oct 05, 2006
Secretary of State

Current Principal Place of Business:

2401 13TH STREET
ST CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

2401 13TH STREET
ST CLOUD, FL 34769

New Mailing Address:

FEI Number: 59-2065479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIFE, JOHNNIE E
2401 13TH ST
ST. CLOUD, FL 34769 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: JOHNNIE E RIFE

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: PD () Delete
Name: RIFE, JOHNNIE E
Address: 251 N.E. LAKESHORE DR.
City-St-Zip: KISSIMMEE, FL

Title: V () Delete
Name: RIFE, KENNETH E
Address: 1501 DAKOTA AVE
City-St-Zip: ST CLOUD, FL

Title: AV () Delete
Name: BOGUS, PATRICIA S
Address: 1859 KINF EDWARDS DR
City-St-Zip: KISSIMMEE, FL

Title: AV () Delete
Name: SWITZER, SHARON
Address: 1501 DAKOTA AVE
City-St-Zip: ST CLOUD, FL

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD D DANLEY

ACCT

10/05/2006

Electronic Signature of Signing Officer or Director

Date