

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F93000005425

FILED
Oct 09, 2007
Secretary of State

Entity Name: SPOONERS SNAPPY TOMATO PIZZA COMPANY

Current Principal Place of Business:

2510 SE 17TH ST
SUITE C
OCALA, FL 41051 US

New Principal Place of Business:

1758 SE 27TH LOOP
OCALA, FL 34471 US

Current Mailing Address:

7230 TURFWAY ROAD
FLORENCE, KY 41042 US

New Mailing Address:

FEI Number: 61-1235336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CAROL RECORD

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: C () Delete
Name: DETERS, CHARLES H
Address: 12561 GREEN ROAD
City-St-Zip: WALTON, KY 41094

Title: D () Delete
Name: DETERS, ERIC
Address: 12029 SOUTHRIDGE DRIVE
City-St-Zip: WALTON, KY 41094

Title: D (X) Delete
Name: STIEGELMEYER, NEIL
Address: 7230 TURFWAY ROAD
City-St-Zip: FLORENCE, KY 41042

Title: S () Delete
Name: DETERS, JEREMY
Address: 7230 TURFWAY ROAD
City-St-Zip: FLORENCE, KY 41042

Title: T () Delete
Name: DETERS, NATHAN
Address: 7230 TURFWAY ROAD
City-St-Zip: FLORENCE, KY 41042

Title: D () Delete
Name: MEENACH, DAVE
Address: 7230 TURFWAY ROAD
City-St-Zip: FLORENCE, KY 41042

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:

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: JEREMY DETERS

S

10/09/2007

Electronic Signature of Signing Officer or Director

Date