

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F98000003394

Entity Name: CHICKEN MAGIC, INC.

**FILED**  
**Nov 01, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

1450 TIMBERLANE ROAD  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

**Current Mailing Address:**

781 BRICKYARD RD  
COMER, GA 30629

**New Mailing Address:**

FEI Number: 63-1187929

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CT 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: PETER SOYZA

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GUTHRIE, TARA  
Address: 6608 FM 1886  
City-St-Zip: AZLE, TX

Title: ST ( ) Delete  
Name: GUTHRIE, TARA  
Address: 6608 FM 1886  
City-St-Zip: AZLE, TX

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: GUTHRIE, TARA C PRES  
Address: 6608 FM 1886  
City-St-Zip: AZLE, TX

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: TARA C GUTHRIE

PRES

11/01/2007

Electronic Signature of Signing Officer or Director

Date