

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H42173

FILED  
Sep 28, 2009  
Secretary of State

Entity Name: FINICKY PET FOOD, INC.

**Current Principal Place of Business:**

15340 FIDDLESTICKS BLVD  
FT MYERS, FL 339123925

**New Principal Place of Business:**

**Current Mailing Address:**

15340 FIDDLESTICKS BLVD  
FT MYERS, FL 339123925

**New Mailing Address:**

14581 DORY LANE  
FT MYERS, FL 33908

FEI Number: 59-2508765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHOFIELD, WILLIAM  
15340 FIDDLESTICKS BLVD  
FT MYERS, FL 339123925 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: WILLIAM SCHOFIELD

\_\_\_\_\_  
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: SCHOFIELD, BILL  
Address: 15340 FIDDLESTICKS BLVD  
City-St-Zip: FT MYERS, FL 339123925

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

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: BILL SCHOFIELD

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

09/28/2009

\_\_\_\_\_  
Date