

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 19, 2009  
Secretary of State**

DOCUMENT# M88774

Entity Name: LORENZ ANIMAL FOODS, INC.

**Current Principal Place of Business:**

30653 NW CENTER AVENUE  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

30653 NW CENTER AVENUE  
OKEECHOBEE, FL 34972

**New Mailing Address:**

FEI Number: 65-0071859      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GRIFFIS, ROY E  
C/O CASSELS & MCCALL  
400 NW 2ND STREET  
OKEECHOBEE, FL 34972 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: VDDP ( ) Delete  
Name: LORENZ, KIMBERLY  
Address: 30653 N.W. CENTER AVE.  
City-St-Zip: OKEECHOBEE, FL 34972

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

Title: PD (X) Change ( ) Addition  
Name: GRIFFIS, ROY E  
Address: 725 GRACES COURT  
City-St-Zip: MCDONOUGH, GA 30252

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: ROY E GRIFFIS

PD

07/19/2009

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

\_\_\_\_\_ Date