2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 15, 2009
Secretary of State

DOCUMENT# N01000007063

Entity Name: OPEN DOOR FOOD BANK, INC.

Current Principal Place of Business:

750 JARMILA LANE
FT. MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

750 JARMILA LANE
FT. MYERS, FL 33905

New Mailing Address:

FEI Number: 65-1141712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JETERS, GLENDA
750 JARMILA LANE
FT. MYERS, FL 33905 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: GLENDA JETERS

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRC ( ) Delete
Name: HINDS, FRANK SR
Address: P O BOX 1254
City-St-Zip: FORT MYERS, FL 33902

Title: DR ( ) Delete
Name: WELCH, EDGARDO
Address: P O BOX 1254
City-St-Zip: FORT MYERS, FL 33902

Title: PD ( ) Delete
Name: JETERS, GLENDA
Address: 750 JARMILA LANE
City-St-Zip: FORT MYERS, FL 33905

Title: DIR ( ) Delete
Name: PULLER, ALVIN L
Address: P O BOX 1254
City-St-Zip: FORT MYERS, FL 33992

Title: DIR ( ) Delete
Name: PULLER, STACY
Address: P O BOX 1254
City-St-Zip: FORT MYERS, FL 33902

Title: E ( ) Delete
Name: MILLER, JEANETTE
Address: PO BOX 1254
City-St-Zip: FORT MYERS, FL 33902

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STACEY PULLER DIR. 10/15/2009

Electronic Signature of Signing Officer or Director Date