2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000010070

Entity Name: SOLID SEED INC

FILED Dec 28, 2009 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:		
12512 WHITE CEDAR TRAIL JACKSONVILLE, FL 32226		604	1717 COUNTY ROAD 220 604 ORANGE PARK, FL 23003		
Current Mailing Address:			New Mailing Address:		
12512 WHITE CEDAR TRAIL JACKSONVILLE, FL 32226			1717 COUNTY ROAD 220		
		604			
FEI Number In accordan	: FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the corporation did not r	FEI Number Not Appl eceive the prior notic)	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:		
	S, ROBIN L HTE CEDAR TRAIL IVILLE, FL 32226 US				
	e named entity submits this statement for the pur e of Florida.	rpose of changing i	its registered office or registered agent, or	both,	
SIGNATUI	RE: ROBIN L CHARLES				
	Electronic Signature of Registered Agent	t	Date		
OFFICER	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	P () Delete CHARLES, LAFASHION N 12512 WHITE CEDAR TRAIL JACKSONVILLE, FL 32226	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V () Delete CHARLES, JEAN D 12512 WHITE CEDAR TRAIL JACKSONVILLE, FL 32226	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition CHARLES, JEAN D 12512 WHITE CEDAR TRAIL JACKSONVILLE, FL 32226		
Title: Name: Address: City-St-Zip:	T () Delete CILLIAC, JEAN V 968 HIBERNIA FOREST DRIVE FLEMING ISLAND, FL 32003	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S () Delete LUNDY, KIM SEC 12512 WHITE CEDAR TRAIL JACKSONVILLE, FL 32226	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	DIR () Delete CHARLES, JENNIFER S	Title: Name:	() Change () Addition		

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.

Address:

City-St-Zip:

SIGNATURE: JEAN D CHARLES VP 12/28/2009

1021 FLOYD STREET

FLEMING, FL 32003

Address: City-St-Zip: