2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 28, 2009
Secretary of State

DOCUMENT# N08000010422

Entity Name: EMERALD COAST ORGANIC FOOD COOP INC.

Current Principal Place of Business:

119 TRUXTON AVE.
FT. WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

119 TRUXTON AVE.
FT. WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 26-4225176 **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:

FRISBEE, KARIN
119 TRUXTON AVE.
FT. WALTON BEACH, FL 32547 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: KARIN FRISBEE
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FRISBEE, KARIN K
Address: 119 TRUXTON AVE.
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: S ( ) Delete
Name: LIKENS, AMY
Address: 119 TRUXTON AVE.
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: T ( ) Delete
Name: FRISBEE, EDWARD M
Address: 119 TRUXTON AVE.
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: FRISBEE, EDWARD M
Address: 119 TRUXTON AVE.
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: T ( ) Change (X) Addition
Name: BROWN, MARLICE F
Address: 119 TRUXTON AVE.
City-St-Zip: FT. WALTON BEACH, FL 32547

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: MARLICE BROWN T 10/28/2009
Electronic Signature of Signing Officer or Director — Date