

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000005364

FILED
Jan 03, 2005
Secretary of State

Entity Name: THE AGRICULTURE FACILITIES ADMINISTRATION AND MANAGEMENT CORPORATION

Current Principal Place of Business:

10 N. CYPRESS STREET
FELLSMERE, FL 32948 US

New Principal Place of Business:

740 TIMBER RIDGE TRAIL SW
VERO BEACH, FL 32962 US

Current Mailing Address:

10 N. CYPRESS STREET
FELLSMERE, FL 32948 US

New Mailing Address:

740 TIMBER RIDGE TRAIL SW
VERO BEACH, FL 32962 US

FEI Number: 31-1471942 **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:

JACKSON, TODD
10 N. CYPRESS STREET
FELLSMERE, FL 32948 US

Name and Address of New Registered Agent:

RING, STEVE
740 TIMBER RIDGE TRAIL SW
VERO BEACH, FL 32962 US

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: STEVE RING

01/03/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARGIOTTA, FRANK
Address: 10 N. CYPRESS STREET
City-St-Zip: FELLSMERE, FL 32948 US

Title: SD (X) Delete
Name: JACKSON, TODD
Address: 10 N. CYPRESS STREET
City-St-Zip: FELLSMERE, FL 32948 US

Title: TD (X) Delete
Name: RING, STEVE
Address: 10 N. CYPRESS STREET
City-St-Zip: FELLSMERE, FL 32948 US

Title: D (X) Delete
Name: HART, W.C.
Address: RT 3 BOX 14
City-St-Zip: MAYO, FL 32066

Title: D (X) Delete
Name: NORDSTEDT, ROGER
Address: 103 FRAZIER ROGERS HALL
City-St-Zip: GAINESVILLE, FL 326110550 US

Title: D (X) Delete
Name: HURST, TERRY
Address: PO BOX 165
City-St-Zip: OXFORD, FL 344840165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: RING, STEVE
Address: 740 TIMBER RIDGE TRAIL SW
City-St-Zip: VERO BEACH, FL 32962 US

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 for the exemption stated in Section 119.07(3)(i), 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: STEVE RING

TD

01/03/2005

Electronic Signature of Signing Officer or Director

Date