

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 14, 2009
Secretary of State**

DOCUMENT# P00000046288

Entity Name: LAURAMORE LIVESTOCK TRANSPORT, INC.

Current Principal Place of Business:

7132 CR 23 C
GLEN ST.MARY, FL 32040

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 655
MACCLENNY, FL 32063

New Mailing Address:

FEI Number: 31-1787230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURAMORE, CHARLES W
7132 CR 23 C
GLEN ST.MARY, FL 32040 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: CHARLES W LAURAMORE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAURAMORE, CHARLES
Address: 7132 CR 23 C
City-St-Zip: GLEN ST.MARY, FL 32040

Title: VPST () Delete
Name: MULLIGAN, JULIE
Address: 5765 CR 23 D
City-St-Zip: GLEN ST. MARY, FL 32040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: JULIE MULLIGAN

VPST

10/14/2009

Electronic Signature of Signing Officer or Director

Date