

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000048603

Entity Name: THE ORGANIC PLACE, INC.

**FILED**  
**Nov 17, 2004**  
**Secretary of State**

**Current Principal Place of Business:**

1246 S. JOHN YOUNG PARKWAY  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

**Current Mailing Address:**

1246 S. JOHN YOUNG PARKWAY  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

FEI Number: 59-0524587

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FUIMAONO, PAULINE  
1246 S. JOHN YOUNG PARKWAY  
KISSIMMEE, FL 34741 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: \_\_\_\_\_

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: D ( ) Delete  
Name: FUIMAONO, PAULINE  
Address: 1246 S. JOHN YOUNG PARKWAY  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: D ( ) Delete  
Name: FUIMAONO, KALETI  
Address: 1246 S. JOHN YOUNG PARKWAY  
City-St-Zip: KISSIMMEE, FL 34741 US

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

SIGNATURE: PAULINE FUIMAONO

D

11/17/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date