2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 17, 2005
Secretary of State

DOCUMENT# P04000017969

Entity Name: IT'S ALWAYS ALLGOOD, INC

Current Principal Place of Business:

719 S. WOODLAND BLVD
FOOD SERVICE
DELAND, FL 32720 US

New Principal Place of Business:

15600 SE 294TH TERRACE RD.
ALTOONA, FL 32702 US

Current Mailing Address:

719 S. WOODLAND BLVD
FOOD SERVICE
DELAND, FL 32720 US

New Mailing Address:

15600 SE 294TH TERRACE RD.
ALTOONA, FL 32702 US

FEI Number: 20-0657065 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLGOOD, CAROLANN
625 SWARTHMORE DRIVE
DELAND, FL 32724 US

Name and Address of New Registered Agent:

ALLGOOD, CAROLANN
15600 SE 294TH TERRACE RD.
ALTOONA, FL 32702 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: CAROLANN ALLGOOD 10/17/2005
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: ALLGOOD, CAROLANN
Address: 625 SWARTHMORE DR
City-St-Zip: DELAND, FL 32724 US

Title: VP ( ) Delete
Name: ALLGOOD, MATTHEW H
Address: 625 SWARTHMORE DR
City-St-Zip: DELAND, FL 32724 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALLGOOD, CAROLANN
Address: 15600 SE 294TH TERRACE RD.
City-St-Zip: ALTOONA, FL 32702 US

Title: VP (X) Change ( ) Addition
Name: ALLGOOD, MATTHEW H
Address: 15600 SE 294TH TERRACE RD.
City-St-Zip: ALTOONA, FL 32702 US

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: CAROLANN ALLGOOD P 10/17/2005
Electronic Signature of Signing Officer or Director Date