

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000135307

Entity Name: SON RISE FARMS, INC.

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

6079 SANDILL RIDGE DR.
LITHIA, FL 33547

New Principal Place of Business:

6023 KESTREL POINT AVE.
LITHIA, FL 33547

Current Mailing Address:

6079 SANDILL RIDGE DR.
LITHIA, FL 33547

New Mailing Address:

6023 KESTREL POINT AVE.
LITHIA, FL 33547

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, TROY A
6079 SANDILL RIDGE DR.
LITHIA, FL 33547 US

Name and Address of New Registered Agent:

ALEXANDER, TROY A
6023 KESTREL POINT AVE.
LITHIA, FL 33547 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: TROY A. ALEXANDER

04/21/2006

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: ALEXANDER, TROY A
Address: 6079 SANDILL RIDGE DR.
City-St-Zip: LITHIA, FL 33547

Title: D () Delete
Name: ALEXANDER, MARGARET F
Address: 6079 SANDILL RIDGE DR.
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALEXANDER, TROY A
Address: 6023 KESTREL POINT AVE.
City-St-Zip: LITHIA, FL 33547

Title: D (X) Change () Addition
Name: ALEXANDER, MARGARET F
Address: 6023 KESTREL POINT AVE.
City-St-Zip: LITHIA, FL 33547

I hereby certify that the information supplied with this filing does not qualify for the 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: TROY A. ALEXANDER

D

04/21/2006

Electronic Signature of Signing Officer or Director

Date