

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000142403

Entity Name: RISING SUN CAFE, INC.

FILED
Dec 11, 2007
Secretary of State

Current Principal Place of Business:

10 MAIN ST.
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

10 SOUTH MAIN ST.
BROOKSVILLE, FL 34601

New Mailing Address:

FEI Number: 20-2126132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, LISA M
817 BUENA VISTA
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

CALLEA, LISA M
211 EDERINGTON DRIVE
BROOKSVILLE, FL 34601 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: LISA M CALLEA

12/11/2007

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: JOHNSON, LISA M
Address: PO BOX 12403
City-St-Zip: BROOKSVILLE, FL 34603

Title: VP () Delete
Name: RICE, SALLIE L
Address: PO BOX 15802
City-St-Zip: BROOKSVILLE, FL 34604

Title: SEC () Delete
Name: JOHNSON, LISA M
Address: PO BOX 12403
City-St-Zip: BROOKSVILLE, FL 34603

Title: TRES () Delete
Name: RICE, SALLIE L
Address: PO BOX 15802
City-St-Zip: BROOKSVILLE, FL 34604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CALLEA, LISA M
Address: PO BOX 12403
City-St-Zip: BROOKSVILLE, FL 34603

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: CALLEA, LISA M
Address: PO BOX 12403
City-St-Zip: BROOKSVILLE, FL 34603

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: LISA M CALLEA

P

12/11/2007

Electronic Signature of Signing Officer or Director

Date