2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000012702

Entity Name: NEDP FOODS, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
11175 SW 93RD COURT OCALA, FL 34481 US	
Current Mailing Address:	New Mailing Address:
3015 SE 41ST STREET OCALA, FL 34480 US	2209 CITRUS BLVD LEESBURG, FL 34748 US
FEI Number: 22-2210327 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
ORTIZ, GEORGE 1515 E SILVER SPRINGS BLVD. SUITE 128 OCALA, FL 34470 US	CASALASPRO, PAT 2209 CITRUS BLVD LEESBURG, FL 34748 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: PAT CASALASPRO	04/28/2009
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 ().	

Title:

City-St-Zip:

OFFICERS AND DIRECTORS:

Title:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition CASALASPRO, PASQUALE Name: Name: 1101 W NORTH BLVD., SUITE 1 Address: Address: City-St-Zip: LEESBURG, FL 34748 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition MARRA, DINO R Name: Name: Address: 11175 SW 93RD COURT Address: OCALA, FL 34481 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: MAYNARD, NANCY Name: MCCARTHY, SEAN 11175 SW 93 CT Address: 11175 SW 93 CT Address: City-St-Zip: OCALA, FL 34481 City-St-Zip: OCALA, FL 34481 Title: (X) Delete Title: () Change () Addition HENDERSON, ERIC Name: Name: Address: 3015 SE 41 STREET Address: OCALA, FL 34480

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: PAT CASALASPRO **PRES** 04/28/2009