

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000034731

FILED
Jan 18, 2007
Secretary of State

Entity Name: CIRCLE "T" FARMS AND EQUESTRIAN CENTER, INC.

Current Principal Place of Business:

2665 OLD NEW YORK AVENUE
DELAND, FL 32720 US

New Principal Place of Business:

Current Mailing Address:

2665 OLD NEW YORK AVENUE
DELAND, FL 32720 US

New Mailing Address:

FEI Number: 20-2540692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TIBBY, PAUL
2665 OLD NEW YORK AVENUE
DELAND, FL 32720 US

Name and Address of New Registered Agent:

TIBBY, PHYLLIS
2665 OLD NEW YORK AVENUE
DELAND, FL 32720 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: PHYLLIS TIBBY

01/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TIBBY, PHYLLIS
Address: 2665 OLD NEW YORK AVENUE
City-St-Zip: DELAND, FL 32720 US

Title: T (X) Delete
Name: TIBBY, PHYLLIS
Address: 2665 OLD NEW YORK AVENUE
City-St-Zip: DELAND, FL 32720 US

Title: VP (X) Delete
Name: TIBBY, PAUL
Address: 2265 OLD NEW YORK AVENUE
City-St-Zip: DELAND, FL 32720 US

Title: S (X) Delete
Name: TIBBY, PAUL
Address: 2665 OLD NEW YORK AVENUE
City-St-Zip: DELAND, FL 32720 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: PHYLLIS TIBBY

PRES

01/18/2007

Electronic Signature of Signing Officer or Director

Date