

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000145934

FILED
Jan 03, 2007
Secretary of State

Entity Name: ORANGEWOOD HARVESTING, INC.

Current Principal Place of Business:

11162 SE HERBERT AVE
ARCADIA, FL 34266

New Principal Place of Business:

43150 FARABEE ROAD
PUNTA GORDA, FL 33982

Current Mailing Address:

PO BOX 743
LABELLE, FL 33975

New Mailing Address:

PO BOX 315
LABELLE, FL 33975

FEI Number: 20-3700620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNELL, DEBORA G
11162 SE HERBERT AVE
LABELLE, FL 33935 US

Name and Address of New Registered Agent:

CONNELL, JUSTIN W
43150 FARABEE ROAD
PUNTA GORDA, FL 33982 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: JUSTIN W. CONNELL

01/03/2007

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: CONNELL, DEBORA G
Address: 11162 SE HERBERT AVE
City-St-Zip: ARCADIA, FL 34266

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONNELL, JUSTIN W
Address: 43150 FARABEE ROAD
City-St-Zip: PUNTA GORDA, FL 33982

Title: VP () Change (X) Addition
Name: CONNELL, REBECCA L
Address: 43150 FARABEE ROAD
City-St-Zip: PUNTA GORDA, FL 33982

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: JUSTIN W CONNELL

PRES

01/03/2007

Electronic Signature of Signing Officer or Director

Date