

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000136455

FILED
Jul 15, 2009
Secretary of State

Entity Name: FULL CIRCLE FARMS OF WELLINGTON, INC.

Current Principal Place of Business:

12685 WHITE CORAL DR
WELLINGTON, FL 33414

New Principal Place of Business:

4749 AVOCADO BLVD
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

12685 WHITE CORAL DR.
WELLINGTON, FL 33414

New Mailing Address:

3210 WARRENSVILLE CENTER RD
207
SHAKER HEIGHTS, OH 44122

FEI Number: 20-5801156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENNINGS, DAVID
12685 WHITE CORAL DR.
WELLINGTON, FL, FL 33414 US

Name and Address of New Registered Agent:

JENNINGS, DAVID
4749 AVOCADO BLVD
ROYAL PALM BEACH, FL 33411 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: DAVID JENNINGS

07/15/2009

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 ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEFFERDINK, AMY K
Address: 12685 WHITE CORAL DR
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: JENNINGS, DAVID H
Address: 12685 WHITE CORAL DR.
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEFFERDINK, AMY K
Address: 3210 WARRENSVILLE CENTER RD 207
City-St-Zip: SHAKER HEIGHTS, OH 44122

Title: D (X) Change () Addition
Name: JENNINGS, DAVID H
Address: 4749 AVOCADO
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: AMY JENNINGS

PART

07/15/2009

Electronic Signature of Signing Officer or Director

Date