

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000002370

Entity Name: ENGEDI SPECIALTIES, INC.

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

6464 SW US HWY 27  
LOT 17  
FORT WHITE, FL 32038

## **New Principal Place of Business:**

8547 SW US HWY 27  
FORT WHITE, FL 32038

## **Current Mailing Address:**

429 SW GREENWOOD TERRACE  
FORT WHITE, FL 32038

## **New Mailing Address:**

PO BOX 459  
FORT WHITE, FL 32038

FEI Number: 59-3486089

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

HOLMBERG, JUDEE  
429 SW GREENWOOD TERRACE  
FORT WHITE, FL 32038 US

## **Name and Address of New Registered Agent:**

HOLMBERG, CARL F  
429 SW GREENWOOD TERRACE  
FORT WHITE, FL 32038 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: CARL F. HOLMBERG

04/14/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: HOLMBERG, CARL  
Address: 429 SW GREENWOOD TERR  
City-St-Zip: FT WHITE, FL 32038

I hereby 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 all other like empowered.

SIGNATURE: CARL F. HOLMBERG

PD

04/14/2011

Electronic Signature of Signing Officer or Director

Date