

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000072895

Entity Name: MANUDEN FARMS, INC.

**FILED**  
**Nov 27, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

4001 N.W. 130TH AVE.  
OCALA, FL 34482

**New Principal Place of Business:**

**Current Mailing Address:**

4001 N.W. 130TH AVE.  
OCALA, FL 34482

**New Mailing Address:**

FEI Number: 59-3594896

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEMERIC, NICHOLAS  
4001 N.W. 130TH AVE.  
OCALA, FL 34482 US

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

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: NICHOLAS DEMERIC

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DEMERIC, NICHOLAS  
Address: 4001 NW 130 AVE.  
City-St-Zip: OCALA, FL 34482

Title: D ( ) Delete  
Name: MERIC DE, JACQUELINE A  
Address: 4001 NW 130TH AVE  
City-St-Zip: OCALA, FL 34482

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: NICHOLAS DEMERIC

D

11/27/2007

Electronic Signature of Signing Officer or Director

Date