

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F00000000931

1. Corporation name
Old London Foods, Inc.

2. Principal Office Address
One Westbrook Corp. Ctr.

3. Mailing Office Address
One Westbrook Corp. Ctr.

Suite, Apt. #, etc
Suite 430

City & State
Westchester, IL

Zip
60153

Country
USA

REINSTATEMENT 05

4. Date incorporated or Qualified To Do Business in Florida 2/17/2000

5. FEI Number 13-3954951

6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City
Tallahassee

State
FL

Zip Code
32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503 or 617.0503, F.S.

Signature of Registered Agent *Deborah D. Skipper* **Deborah D. Skipper** Date *10/3/05*
REGISTERED AGENT MUST SIGN **Asst. V. PRES.**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO/P	Timothy M. Harris	1 Westbrook Corp. Ctr. Ste 430	Westchester, IL 60153
CFO	William Kenealy	1 Westbrook Corp. Ctr. Ste 430	Westchester, IL 60153
VP	Peter Hetrick	1 Westbrook Corp. Ctr. Ste 430	Westchester, IL 60153
VP	Steve Wilcy	1 Westbrook Corp. Ctr. Ste 430	Westchester, IL 60153

10. I certify that I am an officer or director of the name of the corporation in regard to this application as required by in chapter 617 or 617, F.S. (I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *WJK* **William J. KENEALY** 9-30-05 708-731-2435
Date Daytime Phone #

H05000234307 3

**Florida Department of State
Division of Corporations
Public Access System**

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To:

Division of Corporations
Fax Number : (850)205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

CORPORATION REINSTATEMENT

OLD LONDON FOODS, INC.

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Page Count	02
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