## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P01000020555

Entity Name: POI DEVELOPMENT, INC.

FILED Oct 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17280-1 EAGLE TRACE 5280 MYRTLE LANE FORT MYERS, FL 33908 NAPLES, FL 34113

Current Mailing Address: New Mailing Address:

17280-1 EAGLE TRACE 5280 MYRTLE LANE FORT MYERS, FL 33908 NAPLES, FL 34113

FEI Number: 65-1147996 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COLSON, KARIN A MRS.

17280-1 EAGLE TRACE

FORT MYERS, FL 33908 US

COLSON, KARIN A MRS.

5280 MYRTLE LANE

NAPLES, FL 34113 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: KARIN COLSON 10/17/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 ST. JOHN, EARL
 Name:
 ST. JOHN, EARL

 Address:
 17280-1 EAGLE TRACE
 Address:
 5280 MYRTLE LANE

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:
 NAPLES, FL 34113

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BURGESON, RICHARD
 Name:

 Address:
 1201 MIMOSA COURT
 Address:

 City-St-Zip:
 MARCO ISLAND, FL 34145
 City-St-Zip:

Title: ST ( ) Delete Title: STVP (X) Change ( ) Addition

 Name:
 COLSON, KARIN
 Name:
 COLSON, KARIN

 Address:
 10867 FIELD FAIR DRIVE
 Address:
 5280 MYRTLE LANE

 City-St-Zip:
 NAPLES, FL 34119
 City-St-Zip:
 NAPLES, FL 34113

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: KARIN COLSON VP 10/17/2006