

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000115638

FILED  
Oct 17, 2006  
Secretary of State

Entity Name: TERRA VERDE JOINT VENTURE, INC.

## Current Principal Place of Business:

C/O POI DEVELOPMENT, INC.  
17280-1 EAGLE TRACE  
FORT MYERS, FL 33908

## New Principal Place of Business:

C/O POI DEVELOPMENT, INC.  
5280 MYRTLE LANE  
NAPLES, FL 34113

## Current Mailing Address:

C/O POI DEVELOPMENT, INC.  
17280-1 EAGLE TRACE  
FORT MYERS, FL 33908

## New Mailing Address:

C/O POI DEVELOPMENT, INC.  
5280 MYRTLE LANE  
NAPLES, FL 34113

FEI Number: 33-1037766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLSON, KARIN A  
C/O POI DEVELOPMENT, INC.  
17280-1 EAGLE TRACE  
FORT MYERS, FL 33908 US

## Name and Address of New Registered Agent:

COLSON, KARIN A  
C/O POI DEVELOPMENT, INC.  
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:

Title: D ( ) Delete  
Name: ST. JOHN, EARL  
Address: 17280-1 EAGLE TRACE  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: BURGESSON, RICHARD  
Address: 17280-1 EAGLE TRACE  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: COLSON, KARIN  
Address: 17280-1 EAGLE TRACE  
City-St-Zip: FORT MYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ST. JOHN, EARL  
Address: 5280 MYRTLE LANE  
City-St-Zip: NAPLES, FL 34113

Title: D (X) Change ( ) Addition  
Name: BURGESSON, RICHARD  
Address: 5280 MYRTLE LANE  
City-St-Zip: NAPLES, FL 34113

Title: D (X) Change ( ) Addition  
Name: COLSON, KARIN  
Address: 5280 MYRTLE LANE  
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

D

10/17/2006

Electronic Signature of Signing Officer or Director

Date