## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000161178

Entity Name: PINE ISLAND TIMBER & INVESTMENT/MIZELL. INC

FILED Apr 24, 2008 Secretary of State

Littly Na	IIIE. FINE ISL	AND HINDER & INVESTIMENT	AVIIZEEE, IINC.		
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	MUSEUM DR IVILLE, FL 32:				
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
	MUSEUM DR IVILLE, FL 32:				
FEI Number	: 20-1939477	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	(EVIN L MUSEUM DR IVILLE, FL 32:		TOWERS, LAWRENC 1914 ART MUSEUM D JACKSONVILLE, FL 3	PRIVE	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE: LAWRE	NCE RANDALL TOWERS		04/24/2008	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DP ( TOWERS, L. F 1914 ART MUS JACKSONVILL	SEUM DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DV ( PYBURN, WIL 1914 ART MUS JACKSONVILL	SEUM DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT (X TROUP, KEVIN 1914 ART MUS JACKSONVILL	SEUM DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DS (X MESIANO, MIC	() Delete CHAEL D	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: LAWRENCE RANDALL TOWERS DP 04/24/2008

1914 ART MUSEUM DRIVE

JACKSONVILLE, FL 32207

Address:

City-St-Zip: