## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000159894

Entity Name: JOE DIRT INC.

FILED Jan 24, 2008 Secretary of State

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

I099 A1A BEACH BLVD 100 ARRICOLA AVE

ST. AUGUSTINE, FL 32080 US ST. AUGUSTINE, FL 32080 US

Current Mailing Address: New Mailing Address:

1009 A1A BEACH BLVD 100 ARRICOLA AVE

ST. AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 32080

FEI Number: 20-3896481 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

WILLIAMS, JOSEPH T WILLIAMS, JOSEPH T PRES 1099 A1A BEACH BLVD WILLIAMS, JOSEPH T PRES 100 ARRICOLA AVE

ST. AUGUSTINE, FL 32080 US ST. AUGUSTINE, FL 32080 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: JOSEPH WILLIAMS 01/24/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, () Delete Title: P, (X) Change () Addition Name: WILLIAMS, JOSEPH T PRES WILLIAMS, JOSEPH T PRES

Name: WILLIAMS, JOSEPH T Name: WILLIAMS, JOSEPH T PRES
Address: 1099 A1A BEACH BLVD Address: 100 ARRICOLA AVE

City-St-Zip: ST. AUGUSTINE, FL 32080 US City-St-Zip: ST. AUGUSTINE, FL 32080 US

 Name:
 HINMAN, TERI S
 Name:
 PACE, WALTER VP

 Address:
 2775 CR 214
 Address:
 100 ARRICOLA AVE

City-St-Zip: ST. AUGUSTINE, FL 32084 US City-St-Zip: ST. AUGUSTINE, FL 32080 US

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: JOSEPH WILLIAMS PRES 01/24/2008