

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000112595

FILED  
Dec 17, 2010  
Secretary of State

**Entity Name:** LAND & PROPERTIES OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

4120 LIVE OAK LANE  
MACCLENNEY, FL 32063 US

**New Principal Place of Business:**

6112 COPPER DRIVE  
MACCLENNEY, FL 32063 US

**Current Mailing Address:**

4120 LIVE OAK LANE  
MACCLENNEY, FL 32063 US

**New Mailing Address:**

6112 COPPER DRIVE  
MACCLENNEY, FL 32063 US

FEI Number: 20-5479818

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOBLEY, JERRELL W  
4120 LIVE OAK LANE  
MACCLENNEY, FL 32063 US

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

MOBLEY, JERRELL W  
6112 COPPER DRIVE  
MACCLENNEY, FL 32063 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: JERRELL W. MOBLEY

12/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MOBLEY, JERRELL W  
Address: 6112 COPPER DRIVE  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: VPD  
Name: YARBOROUGH, FRED M  
Address: 15092 RIVERHILLS DRIVE  
City-St-Zip: GLEN ST. MARY, FL 32040 US

Title: TD  
Name: YARBOROUGH, KIMBERLY  
Address: 15092 RIVERHILLS DRIVE  
City-St-Zip: GLEN ST. MARY, FL 32040 US

Title: SD  
Name: MOBLEY, LISA D  
Address: 6112 COPPER DRIVE  
City-St-Zip: MACCLENNEY, FL 32063 US

I hereby 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 all other like empowered.

SIGNATURE: JERRELL W MOBLEY

PRES

12/17/2010

Electronic Signature of Signing Officer or Director

Date