

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 NOV 29 PM 3:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F95000004141

1. Corporation Name
ABERDEEN FUND MANAGERS, INC.

2. Principal Office Address
One Financial Plaza, #2210
Ft. Lauderdale, FL 33394

3. Mailing Office Address
200 S. Biscayne

Suite, Apt. #, etc.
2210

Suite, Apt. #, etc.

City & State
Ft. Lauderdale, FL

City & State

Zip Country
33394 USA

Zip Country

REINSTATEMENT 97-00

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
510368279

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
ETHAN W. JOHNSON, ESQ.

200003491652--B

-12/08/00 01043-003

Street Address (P.O. Box Number is Not Acceptable)

5300 First Union Financial Center, 200 S. Biscayne Blvd.

***1200.00 ***1200.00

Suite, Apt. #, Etc.

City
Miami

State Zip Code
FL 33131-2339

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Ethan W. Johnson Ethan W. Johnson Date 11/28/00

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO	Bev Hendry	One Financial Plaza, #2210	Ft. Lauderdale, FL 33394
Pres.	Martin J. Gilbert	One Financial Plaza, #2210	Ft. Lauderdale, FL 33394
Direc.	James L. Pope	One Financial Plaza, #2210	Ft. Lauderdale, FL 33394
Direc.	Richard D. Fabricius	One Financial Plaza, #2210	Ft. Lauderdale, FL 33394

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

KE

Gilbert J. Martin

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-28-2000

Date

(954) 767-9900

Daytime Phone #