2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000100815

Entity Name: SELLSTARS MANUFACTURER HOME SALES, INC.

FILED Nov 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
265 E MARION AVE UNIT 114 PUNTA GORDA, FL 33950	4419 DEL PRADO BLVD. SUITE 3 CAPE CORAL, FL 33914

Current Mailing Address: New Mailing Address:

265 E MARION AVE UNIT 114 4419 DEL PRADO BLVD.
PUNTA GORDA, FL 33950 SUITE 3
CAPE CORAL,, FL 33914

FEI Number: 20-1410769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BENNETT, THOMAS M 265 E MARION AVE UNIT 114 PUNTA GORDA, FL 33950 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: THOMAS M BENNETT

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: BENNETT, THOMAS M Name:

Name: BENNETT, THOMAS M
Address: 1697 EDITH ESPLANADE Address:
City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip:

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 MEDAL, JAMES F
 Name:
 MEDAL, JAMES F

 Address:
 1401 SW 53RD TERR
 Address:
 1401 SW 53RD TERR

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33914

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: THOMAS M BENNETT PD 11/07/2006