2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#720915

FILED Dec 01, 2009 Secretary of State

Entity Name: MEDITERRANEAN MANORS ASSOCIATION, INC.

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

2700 BAYSHORE BLVD DUNEDIN, FL 34698 US

Current Mailing Address: New Mailing Address:

2700 BAYSHORE BLVD DUNEDIN, FL 34698 US

FEI Number: 59-1388303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CIANFRONE, JOSEPH R P.A. 1964 BAYSHORE BLVD DUNEDIN, FL 34698 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 R. CIANFRONE

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 DONAHUE, BOB
 Name:
 DONAHUE, BOB

 Address:
 5901 US HWY 19
 Address:
 2700 BAYSHORE BLVD.

City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: DUNEDIN, FL 34698 US

 Address:
 5901 US HWY 19
 Address:
 2700 BAYSHORE BLVD.

 City-St-Zip:
 NEW PORT RICHEY, FL 34652 US
 City-St-Zip:
 DUNEDIN, FL 34698 US

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

 Name:
 KOEHLER, BETTY J
 Name:
 KOEHLER, BETTY J

 Address:
 5901 US HWY 19
 Address:
 2700 BAYSHORE BLVD.

 City-St-Zip:
 NEW PORT RICHEY, FL 34652 US
 City-St-Zip:
 DUNEDIN, FL 34698 US

 Name:
 GILLOOLEY, ED
 Name:
 BREINER, ROBERT

 Address:
 5901 US HWY 19
 Address:
 2700 BAYSHORE BLVD.

 City-St-Zip:
 NEW PORT RICHEY, FL 34652 US
 City-St-Zip:
 DUNEDIN, FL 34698 US

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

 Name:
 Name:
 GRIFFIN, GRACE

 Address:
 Address:
 2700 BAYSHORE BLVD.

 City-St-Zip:
 City-St-Zip:
 DUNEDIN, FL 34698 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BOB DONAHUE PD 12/01/2009