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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 OCT 22 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # #852062

1. Corporation Name
MACAttee, INC.

REINSTATEMENT 01-02

2. Principal Office Address
114 East 25th St.
Suite, Apt. #, etc.
City & State
Baltimore MD
Zip 21218 Country

3. Mailing Office Address
100 Harbor View Drive
Suite, Apt. #, etc.
SALES CENTER
City & State
Baltimore, MD
Zip 21230 Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number
59-2012465
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED [ ] $30.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent
Name
Gables Residential Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)
5600 South West 12th St.
Suite, Apt. #, Etc.
Attn: Pat Wright
City
North Lauderdale
State FL Zip Code 33068

100008708071
10/31/02--01002--010 **900.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0501, F.S.
Signature of Registered Agent Pat Wright
REGISTERED AGENT MUST SIGN
Date 6.18.02

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
PT	Hettleman, Stuart	114 E 25th Street	Baltimore, Md 21218
V	Tawney, Bosley C	"	"
S	Tyler, Victoria J	"	"
	10/22/02 Pat Wrigh gave authorization by phone to make corrections		10/10/22

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.

MACATTEE, INC.
SIGNATURE: BY: Bosley C. Tawney V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BOSLEY C. TAWNEY

6.18.02
Date

410 528-1122
Daytime Phone #