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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

12 DEC 14 PM 4:12

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J98048

1. Corporation Name

BARBARA KNIGHT MANORS INC

2. Principal Office Address - No P.O. Box #

903 2ND STREET N

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ST PETERSBURG FL

City & State

Zip

33701

Country

PINELLAS

Zip

Country

400226604154

12/10/12--01006--005 **1450.00

10-12

CR20081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

5. PEI Number

59-2868654

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$0.75 Additional Fee required
for a Certificate of Status.

7. Name and Address of Current Registered Agent

Name

WEBSTER B KNIGHT SR

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

903 2ND STREET N

Suite, Apt. #, etc.

City

ST PETERSBURG

State

FL

Zip Code

33701

REINSTATEMENT

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*Webster B Knight Sr.*

Date

12-14-12

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
P	WEBSTER B KNIGHT SR	903 2ND STREET N	ST PETERSBURG FL 33701

DEC 14 2012

S. PRATHER

10. E-mail Address: PATRICIA@SUNSTATECPA.COM

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Webster B Knight Sr.

12-14-12

33701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

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SUNSTATE ACCOUNTING & TAX SERVICES PA
6925 112th Circle - Suite 102
Largo, FL 33778
727-548-4400

December 14, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations
Fax: 850-245-6017

Attention: Stacy

Dear Stacy,

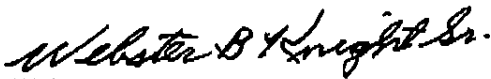
Mr. Webster B Knight Sr has no intention of stopping the voluntary dissolution of document number P12000093280, Barbara Knight Manors Inc. It was formed in error.

The Corporation Reinstatement for Document # J98048 - Barbara Knight Manors Inc follows. The EIN number remains the same at 59-2868654.

You are in receipt of \$1,450.00 to reinstate Document # J98048.

Thank you for your assistance in this matter.

Sincerely yours,


Webster B Knight Sr.

Cc; Patricia Cramer
Sunstate Accounting & Tax Services PA

David L Foster PA
Foster & Foster, Attorneys and Counselors at Law