2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000005685

FILED Feb 06, 2007 Secretary of State

Entity Name: MANCHESTER ESTATES PROPERTY OWNERS ASSOCIATION, INC.

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

989 TAMIAMI TRAIL 19039 MIDWAY BLVD

PORT CHARLOTTE, FL 33953 PORT CHARLOTTE, FL 33948

Current Mailing Address: New Mailing Address:

989 TAMIAMI TRAIL 19039 MIDWAY BLVD

PORT CHARLOTTE, FL 33953 PORT CHARLOTTE, FL 33948

FEI Number: 20-0253073 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:

MCKINLEY, MICHAEL R PORTO, ROBERT M 18401 MURDOCK CIR PORTO, ROBERT M 19039 MIDWAY BLVD

PORT CHARLOTTE, FL 33948 US PORT CHARLOTTE, FL 33948 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: ROBERT M PORTO 02/06/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS () Delete Title: PREZ (X) Change () Addition Name: DEGROSS, DEAN R Name: PORTO, ROBERT M

Name: DEGROSS, DEAN R Name: PORTO, ROBERT M
Address: 989 TAMIAMI TRAIL Address: 19039 MIDWAY BLVD

City-St-Zip: PORT CHARLOTTE, FL 33953 City-St-Zip: PORT CHARLOTTE, FL 33948

Title: T () Delete Title: VP (X) Change () Addition Name: DEGROSS, DEAN R Name: BESHEARS, MARC

Address: 989 TAMIAMI TRAIL Address: 995 TAMIAMI TRAIL SUITE B

City-St-Zip: PORT CHARLOTTE, FL 33953 City-St-Zip: PORT CHARLOTTE, FL 33953

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

Name:FITZGERALD, DAWNName:GUAGLIANO, KATHYAddress:989 TAMIAMI TRAILAddress:19033 MIDWAY BLVD

City-St-Zip: PORT CHARLOTTE, FL 33953 City-St-Zip: PORT CHARLOTTE, FL 33948

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

 Name:
 KROMM, IRENE
 Name:

 Address:
 989 TAMIAMI TRAIL
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33953
 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT M PORTO PREZ 02/06/2007