2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000098610

Entity Name: HEDMAN REALTY, INC.

FILED Nov 14, 2005 Secretary of State

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

608 SW 9TH CT 4520 SKYLINE BLVD. #206 CAPE CORAL, FL 33991 CAPE CORAL, FL 33914

Current Mailing Address: New Mailing Address:

608 SW 9TH CT 4520 SKYLINE BLVD. #206 CAPE CORAL, FL 33991 CAPE CORAL, FL 33914

FEI Number: 20-1311544 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:

HEDMAN, MAURICE
608 SW 9TH STREET
CAPE CORAL, FL 33991 US
HEDMAN, MAURICE
4520 SKYLINE BLVD. #206
CAPE CORAL, FL 33914 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: MAURICE HEDMAN 11/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HEDMAN, MAURICE HEDMAN, MAURICE Name: Name: 608 SW 9TH CT 4520 SKYLINE BLVD. #206 Address: Address: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip:

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

 Name:
 HEDMAN, MAURICE
 Name:
 HEDMAN, MAURICE

 Address:
 608 SW 9TH CT
 Address:
 4520 SKYLINE BLVD. #206

 City-St-Zip:
 CAPE CORAL, FL 33991
 City-St-Zip:
 CAPE CORAL, FL 33914

Title: TRES () Delete Title: TRES (X) Change () Addition Name: HEDMAN, MAURICE Name: HEDMAN, MAURICE

 Name:
 HEDMAN, MACRICE
 Name:
 HEDMAN, MACRICE

 Address:
 608 SW 9TH CT
 Address:
 4520 SKYLINE BLVD. #206

 City-St-Zip:
 CAPE CORAL, FL 33991
 City-St-Zip:
 CAPE CORAL, FL 33914

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

Name:HEDMAN, MAURICEName:HEDMAN, MAURICEAddress:608 SW 9TH CTAddress:4520 SKYLINE BLVD. #206City-St-Zip:CAPE CORAL, FL 33991City-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 Section 119.07(3)(i), 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: MAURICE HEDMAN P 11/14/2005