

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000085651

FILED
Sep 26, 2007
Secretary of State

Entity Name: KEY DEVELOPERS GROUP MANAGEMENT, INC.

Current Principal Place of Business:

918 CHANNELSIDE DR
TAMPA, FL 33602

New Principal Place of Business:

1101 CHANNELSIDE DRIVE
237
TAMPA, FL 33602

Current Mailing Address:

918 CHANNELSIDE DR
TAMPA, FL 33602

New Mailing Address:

1101 CHANNELSIDE DRIVE
TAMPA, FL 33602

FEI Number: 20-2998734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FOWLER WHITE BOGGS BANKER P.A.
C/O HUNTER J BROWNLEE
501 KENNEDY BLVD STE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

HUSSAIN, FIDA SIRDAR
1101 CHANNELSIDE DRIVE
237
TAMPA, FL 33602 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: FIDA SIRDAR HUSSAIN

09/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HUSSAIN, FIDA S
Address: 918 CHANNELSIDE DR
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HUSSAIN, FIDA S
Address: 1101 CHANNELSIDE DRIVE, #237
City-St-Zip: TAMPA, FL 33602

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

SIGNATURE: FIDA SIRDAR HUSSAIN

D

09/26/2007

Electronic Signature of Signing Officer or Director

Date