DOCUMENT # P9400024163 1. Entity Name MANOR HALL, INC.							Feb 04, 2002 8:00 am Secretary of State 02-04-2002 90257 004 ***150.00					
2. Principal F	Place of Business		3. Mailing Address					ST MOTH BANK EDA	II QBILO IFOIT DIA	I O I I I I I I I I I I I I I I I I I I		
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State			4.	FEI Number 65-0	482513			plied For t Applicable]
Zip	Co	untry	Zip	Coun	try	5.	Certificate of Status	Desired [75 Addi	itional	1
	6. Name and	Address of Current Re	gistered Agent	<u> </u>	·	7.	Name and Address	of New Regis		<u> </u>		1
					Name					-		1
GLENDINNING, RENEA % KERKERING BARBERIO & CO PA 1858 RINGLING BLVD SARASOTA FL 34236					Street A	ddress (P.O.	Box Number is Not A	cceptable)	- 2	Zip Code		- - -
					Ony				FL		<u> </u>	
SIGNATURE Signature, typed or printed name of registered agen Tax filing requirement and elects to do so. (See criteria on back)						00 550.00	10. Election Car Trust Fund (1, -	DATE ing		May Be to Fees	1
11.		OFFICERS AND DIF	ECTORS	12.	- -		DDITIONS/CHANGE	S TO OFFICE	RS AND DIR	ECTORS	IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GERALD, BEVER 42 MANOR HAL HENDON LO	RLY	☐ Delete	TITLE NAM STRE	E Et address -st-zip	Bever	ley, Gerale	-nam	ne Corn	Change recti	Addition	R2E034 (9/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BEVERLY, ADEL 42 MANOR HAL HENDON LO		☐ Delete	- 31	E Et address -St-Zip	Bevor	ley, Adele-	name c	arred	Change	Addition	5
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GLENDINNING, 1858 RINGLING SARASOTA FL		☐ Delete	III .				,		Chánge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	ll l						Change	Addition	
TITLE: NAME STREET AODRESS CITY-ST-ZIP			☐ Delete	31						Change	Addition	
TITLE NAME			☐ Delete	TITLE						Change	Addition	

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: .

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR