

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P94000049818

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

**Entity Name:** MICHAEL MCMANUS & ASSOCIATES, P.A.

**Current Principal Place of Business:**

4507 FURLING LANE  
SUITE 212  
DESTIN, FL 32548

**New Principal Place of Business:**

922 MAR WALT DRIVE  
SUITE 100  
FORT WALTON BEACH, FL 32547

**Current Mailing Address:**

P.O. BOX 2418  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 59-3252143

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCMANUS & ASSOCIATES/MCMANUS, MICHAEL  
4507 FURLING LANE  
SUITE 212  
DESTIN, FL 32548 US

**Name and Address of New Registered Agent:**

MCMANUS & ASSOCIATES/MCMANUS, MICHAEL  
933 MAR WALT DRIVE  
SUITE 100  
FORT WALTON BEACH, FL 32547 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: MICHAEL MCMANUS

03/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCMANUS, MICHAEL  
Address: 922 MAR WALT DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: PRES  
Name: MICHAEL MCMANUS & ASSOCIATES  
Address: 12598 HWY 98 WEST MIRAMAR BEACH  
City-St-Zip: DESTIN, FL 32541

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL MCMANUS

PRES

03/18/2011

Electronic Signature of Signing Officer or Director

Date