2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000075069

Entity Name: DIANE TURTON, REALTY INC.

FILED Nov 14, 2005 Secretary of State

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

50 BEACH RD 511 FORMAN AVENUE **UNIT 402** PT. PLEASANT, NJ 08742

TEQUESTA, FL 33469

New Mailing Address: Current Mailing Address:

50 BEACH RD 511 FORMAN AVENUE

UNIT 402 PT. PLESANT BEACH, NJ 08742 TEQUESTA, FL 33469

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

TURTON, DIANE S TURTON, DIANE S 50 BEACH RD 50 BEACH RD **UNIT 402 UNIT 402**

TEQUESTA, FL 33469 US TEQUESTA, FL 33458 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: DIANE S. TURTON 11/14/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition TURTON, DIANE S TURTON, DIANE S Name: Name: Address:

50 BEACH RD UNIT 402 50 BEACH RD UNIT 402 Address: TEQUESTA, FL 33458 City-St-Zip: TEQUESTA, FL 33469 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition Name: TURTON, ALAN B Name: TURTON, ALAN B

50 BEACH RD UNIT 402 50 BEACH RD UNIT 402 Address: Address: TEQUESTA, FL 33469 TEQUESTA, FL 33458 City-St-Zip: City-St-Zip:

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

TURTON, DAVID Name: TURTON, DAVID Name: 50 BEACH RD UNIT 402 50 BEACH RD UNIT 402 Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: TEQUESTA, FL 33458

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: DIANE S. TURTON PD 11/14/2005