2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 14, 2005
Secretary of State

DOCUMENT# P98000036650

Entity Name: MANATEE BAY REALTY, INC.

Current Principal Place of Business:

301 WINDHAVEN LANE
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

176 CORBIN PARK ROAD
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

301 WINDHAVEN LANE
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

176 CORBIN PARK ROAD
NEW SMYRNA BEACH, FL 32168

FEI Number: 59-3506827 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASSEL, LAURA L
528 CORBIN PARK RD.
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

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: LAURA L. MASSEL

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:

Title: P ( ) Delete
Name: MASSEL, EDWARD L
Address: 301 WINDHAVEN LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V ( ) Delete
Name: MASSEL, JEANNE M
Address: 301 WINDHAVEN LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S ( ) Delete
Name: MASSEL, LAURA L
Address: 36 S.W. 5TH WAY
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MASSEL, EDWARD L
Address: 229 LIVE OAK LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V (X) Change ( ) Addition
Name: MASSEL, JEANNE M
Address: 229 LIVE OAK LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S (X) Change ( ) Addition
Name: MASSEL, LAURA L
Address: 2251 CANDLEWOOD LANE E.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: LAURA L. MASSEL S 03/14/2005

Electronic Signature of Signing Officer or Director — Date