

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000002416

Entity Name: MANATEE RIVER RESORT, INC.

FILED
Oct 12, 2005
Secretary of State

Current Principal Place of Business:

4501 FAIRLANE DR
NORTH PORT, FL 34288

New Principal Place of Business:

PO BOX 640
SARASOTA, FL 34230

Current Mailing Address:

4501 FAIRLANE DR
NORTH PORT, FL 34288

New Mailing Address:

PO BOX 640
SARASOTA, FL 34230

FEI Number: 65-0890257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRIVIK, MARK
4501 FAIRLANE DR
NORTH PORT, FL 34288 US

Name and Address of New Registered Agent:

BRIVIK, MARK
PO BOX 640
SARASOTA, FL 34230 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: MARK BRIVIK

10/12/2005

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:

Title: D () Delete
Name: SMITH, BARBARA K
Address: 4513 WINNERS CIRCLE SUITE 1524
City-St-Zip: SARASOTA, FL 34238

Title: PD (X) Delete
Name: BRIVIK, MARK
Address: 4501 FAIRLANE DR
City-St-Zip: NORTH PORT, FL 34288

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRIVIK, MARK
Address: PO BOX 640
City-St-Zip: SARASOTA, FL 34230

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARK BRIVIK

PRES

10/12/2005

Electronic Signature of Signing Officer or Director

Date