

10/16/2002 WED 13:32 FAX 772-283+4837 POX WACKEEN DUNGEY ET AL

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V72653

1. Corporation Name

MANHATTAN DEVELOPMENT COMPANY, INC. OF MARTIN COUNTY

REINSTATEMENT

2. Principal Office Address

711 SE ST. LUCIE BLVD.

3. Mailing Office Address

711 SE ST. LUCIE BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

STUART, FL 34996

City & State

STUART, FL 34996

Zip

34996

Country

US

Zip

34995

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

10/19/92

5. FEI Number

650366176

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

WILLIAM R. PONSOLDT

Street Address (P.O. Box Number is Not Acceptable)

1000 S.E. Monterey Commons Blvd.

Suite, Apt. #, etc.

City

STUART

State
FLZip Code
34996

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0606 or 617.0603, F.S.

Signature of
Registered AgentWILLIAM R. PONSOLDT
REGISTERED AGENT MUST SIGN

Date 10-16-02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Gunther, Rolf S.	711 SE St. Lucie Blvd.	Stuart, FL 34996

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all taxes owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

10/16/02

Date

772-225-1234

Daytime Phone #

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Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850)205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

CORPORATION REINSTATEMENT

MANHATTAN DEVELOPMENT COMPANY, INC. OF MARTIN COUNTY

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$758.75