2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
07 OCT 12 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 514686

1. Entity Name
MORTGAGE ASSISTANCE CENTER CORPORATION

REINSTATEMENT (1/07) 07

Principal Place of Business	Mailing Address
2416 MAIN ST DALLAS, TX 75226 US	2416 MAIN ST DALLAS, TX 75226 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1341 W Mockingbird LANE	1341 W. Mockingbird LANE
Suite, Apt. #, etc.: West Tower	Suite, Apt. #, etc.: West Tower
City & State: DALLAS TX	City & State: DALLAS TX
Zip: 75247 Country:	Zip: 75247 Country:

4. FEI Number: 06-1413994 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLEMAN, KELLIE 6021 MCMULLIN STREET JUPITER, FL 33458	Name: RICHARD COLEMAN Street Address (P.O Box Number is Not Acceptable): 5005 GARRICK CT City: TAMPA FL Zip Code: 33624

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Richard C. 10/10/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After January 1, 2008, Fee will be $300.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HENSEL, DALE 2416 MAIN ST DALLAS, TX 75226	☒ Delete	Pres Ron Johnson 1341 W Mockingbird LANE DALLAS TX 75247	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BARNETT, DANIEL S 2415 MAIN ST DALLAS, TX 75226	☒ Delete	CFO Rick Coleman 1341 W Mockingbird LANE DALLAS TX 75247	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

M 10/15

200110745962
10/12/07--01068--006 **158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: x Richard C. 10/10/07 214-635-3750
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #