## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 747780** 

FILED Feb 16, 2007 Secretary of State

Entity Name: MORTGAGE BANKERS ASSOCIATION OF CENTRAL FLORIDA, INC.

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

4700 MILLENIA BLVD. SUITE 320

ORLANDO, FL 32839 US

Current Mailing Address: New Mailing Address:

MORTGAGE BANKERS P.O. BOX 940153 MAITLAND, FL 32794 US

FEI Number: 59-1916229 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

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

SMITH, PENNY 4700 MILLENIA BLVD. SUITE 320 ORLANDO, FL 32839 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: PENNY SMITH

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PE ( ) Delete Title: P (X) Change ( ) Addition Name: MORRIS, NATHAN Name: WASINGER, CHRISTOPHER J

Address: 220 E. CENTRAL PARKWAY #2050 Address: 12301 LAKE UNDERHILL ROAD, SUITE 231

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ORLANDO, FL 32828

Title: VP ( ) Delete Title: PE (X) Change ( ) Addition Name: RAWSON, RON Name: CULBERTSON, MICHAEL J Address: 111 N. ORANGE AVENUE Address: 1560 ORANGE AVENUE. SUITE 300

Address: 111 N. ORANGE AVENUE, SUITE 300

City-St-Zip: ORLANDO, FL 32789

City-St-Zip: ORLANDO, FL 32789

Sity-51-Zip. Oklando, FL 32601 City-51-Zip. Oklando, FL 3276

Title: ST () Delete Title: VP (X) Change () Addition Name: FENDLEY, PAMELA Name: ADAMCZAK, A. J

 Address:
 P.O. BOX 628600
 Address:
 NEW BROAD STREET

 City-St-Zip:
 ORLANDO, FL 32862
 City-St-Zip:
 ORLANDO, FL 32814

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

 Name:
 CARLSON, GRETCHEN
 Name:
 FENDLEY, PAMELA

 Address:
 20 NORTH ORANGE AVENUE, #500
 Address:
 P.O. BOX 628600

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32862

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

 Name:
 POWERS, TAMMY
 Name:
 STRICKLAND, KEVIN W

 Address:
 4211 W. BOY SCOUT ROAD #670
 Address:
 1100 TOWN PARK AVENUE

 City-St-Zip:
 TAMPA, FL 33607
 City-St-Zip:
 LAKE MARY, FL 32746

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

 Name:
 WASINGER, CHRIS
 Name:

 Address:
 10027 UNIVERSITY BLVD., #3
 Address:

 City-St-Zip:
 ORLANDO, FL 32817
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN W. STIRCKLAND T 02/16/2007