

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 NOV -4 PM 5:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F01000003585

1. Corporation Name

TEAM ONE MORTGAGE, INC.

Principal Place of Business

11660 ALPHARETTA HIGHWAY  
SUITE 155  
ROSWELL GA 30076

Mailing Address

11660 ALPHARETTA HIGHWAY  
SUITE 155  
ROSWELL GA 30076

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

07/09/2001

5. FEI Number

58-2586132

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PCD	CUNNINGHAM, STEVEN A	1080 HOLCOMB BRIDGE RD., BLDG, 2	ROSWELL GA 30076
S	HARRIS, RANDY L	1080 HOLCOMB BRIDGE RD., BLDG, 2	ROSWELL GA 30076

100008778691

11/04/02--01041--020 \*\*150.00

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

*Shelley Savage*  
**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Shelley Savage  
Vice President

Date

10-24-02

11. 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 fees 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:

*Steven A. Cunningham*  
**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cunningham

10/29/02 770-442-2364

Date

Daytime Phone #

414/102

CR2040 (8/02)

# TeamOne

## MORTGAGE, INC.

October 22, 2002

To Whom It May Concern:

This letter is to inform you that our company, Team One Mortgage, Inc. did not receive the 1<sup>st</sup> or 2<sup>nd</sup> notice for the 2002 Annual Report for the State of Florida. We were able to confirm this with your department yesterday being told that both notices were returned to your department as undeliverable. We did confirm that the address that you have is correct and hopefully this will not happen again. Please accept this letter as a substitute for the \$600.00 reinstatement fee. Please call me with any questions.

Thanks,

*Jennifer H. Krausse*

Jennifer Krausse

Team One Mortgage, Inc.

770-442-2364