

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 16 PM 3:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F02000002056**

1. Corporation Name

GLOBAL EXECUTIVE MORTGAGE, INC.

Principal Place of Business

Mailing Address

~~307B VENICE AVENUE WEST~~
~~VENICE FL 34285~~

~~307B VENICE AVENUE WEST~~
~~VENICE FL 34285~~

421 Commercial Ct Ste C
Venice FL 34292

421 Commercial Court C
Venice FL 34292

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

421 Commercial Ct
Suite, Apt. #, etc. C

421
Commercial Ct Ste C

City & State
Venice FL

City & State
Venice FL

Zip
34292

Country
USA

Zip
34292

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

04/22/2002

5. FEI Number

31-1553409

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PVC	PARKS, JACQUELINE S	920 BRISTOL LANE 5536 White Ibis Dr	STRETSBORO OH 44241 North Port FL 34287
VSTC	PARKS, KEVIN C	920 BRISTOL LANE 5536 White Ibis Dr	STRETSBORO OH 44241 North Port FL 34287

300023858513
10/16/03--01069--003 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PARKS, KEVIN C

~~007B VENICE AVENUE WEST~~
~~VENICE FL 34285~~

421 Commercial Court
Ste C
34292

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

Kevin C Parks

REGISTERED AGENT MUST SIGN

Date

10/15/2003

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:

Kevin C Parks

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/15/2003

Date

Daytime Phone #

(941) 486-1313

CR2E040 (7/03)



GLOBAL EXECUTIVE MORTGAGE, INC.

www.mortgage.vg

October 15, 2003

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee FL 32314-6327

Document # F02000002056

To Whom It May Concern:

I received your notice of Dissolution of Corporation on October 15th, which prompted my call to the Department.

When I first started the process of opening an office in Florida I rented a small two room office to provide an actual mailing address in Venice. Once Global became operational we relocated our office November 1, 2002, to provide enough space to employ loan officers and processors. With this change in address I did not receive the annual report which was to be filed. I believed that all proper notifications were given to all Departments and Agencies that we report to under the normal business environment. Your office has no request for address change on file per my conversation with them.

I utilize a CPA firm for accounting and auditing, and use ADP for payroll. They have stated they filed change of address but somehow the Department of State was overlooked.

I request that the Annual Report/Uniform Business Report be sent to my attention at which time I will forward it to my CPA for completion and filing. I have enclosed a UPS overnight for the form.

I request the Department waive the reinstatement fee because of the error in the mailing address.

I have completed the form for reinstatement with the correct address for our office and have enclosed a check for \$150.00 per instructions from your examiner.

Respectfully submitted,

Kevin C Parks
Chairman