

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-NOV 24 PM 12:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **F02000006377**

1. Corporation Name

**FIRST FEDERATED FINANCIAL GROUP, INC**

Principal Place of Business

Mailing Address

2987 BABCOCK BLVD.  
PITTSBURGH PA 15237

2987 BABCOCK BLVD.  
PITTSBURGH PA 15237



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

**REINSTATEMENT** 03

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

12/23/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

25-1897841

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
P	FALLON, JAMES J	2764 DRAKE COURT	GIBSONIA PA 15044
S	ROZYCZKA, FRANK	2725 WOOSTER DRIVE	ALLISON PARK PA 15101
T	TEDESCHI, MARIO JR	2009 MAIN STREET	PITTSBURGH PA 15215

100024981851  
11/24/03-01093-016 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

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

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

*Connie Bryan*

**CONNIE BRYAN**  
**SPECIAL ASSISTANT SECRETARY**

REGISTERED AGENT MUST SIGN

Date

11/21/2003

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:

*James J Fallon*

**James J Fallon**

Date

11-17-03

412-931-3135

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

# First Federated Financial Group, Inc.

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2987 Babcock Boulevard Pittsburgh, PA 15237

Phone - 412-931-3135

Fax - 412-931-3166

November 18, 2003

Dear Connie:

Please sign in the registration of agent space (box 10), then forward along with the letter and check to the state. Call me with any questions you may have 412-931-3135.

Sincerely,



Jay Fallon  
President

# First Federated Financial Group, Inc.

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2987 Babcock Boulevard Pittsburgh, PA 15237

Phone - 412-931-3135

Fax - 412-931-3166

November 18, 2003

To Whom It May Concern:

This letter is in reference to the dissolution / revocation notice received by First Federated Financial Group, Inc. for not filing a 2003 annual report. First Federated Financial Group, Inc. did not receive either of the two uniform business report notices to file. Please contact me at 412-931-3135 with any questions you may have.

Sincerely,



James J Fallon  
President