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FLORIDA CO	DMPLIANCE SPECIALIS DAVE (TAYLOR, PR			
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<u>-</u>	2331 Hanson Place Tallahassee, Florida 32301 Voice: (850) 942-5464 Fax: (8 www.floridacompliance.com	50) 942-5111	Office Use Dr	EX 20 E
CORPORATION	NAME(S) & DOCUN	IENT NUMBER	(S), (if known):	STATE STATE
1. Famile	oration Name)	orfgage (Document	Gepsention	· · · · · · · · · · · · · · · · · · ·
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Mail out	Will wait	Photocopy	Certificate of Status	• · · · ·
NEW FILINGS	AMENDMEN	rsi.		
Profit	Amendment			=
NonProfit	Resignation of R.A.	, Officer/Director		
Limited Liability	Change of Register	ed Agent		·
Domestication	Dissolution/Withdr	awal		
Other	Merger	-1		
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OTHER FILINGS	REGISTRA QUALIFICA			
Annual Report	Foreign			
Fictitious Name	Limited Partnership	<u>i</u>		
Name Reservation	Reinstatement			
	Trademark			.
	Other	·	. – – – –	· - · ·
		<u> </u>		-
CR2E031(1/95)			Examiner's Initials	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA	-
IN COMPLIANCE WITH SECTION 607. 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	-
(Enter name of corporation; must include "INCORRORATED," "COMPANY," "CORPORATION,"	6
FC Mostyage Corporation	2
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. MA 2. $OH - 3358 Olo$ (Fill number if applicable)	
(State of country inder the faw of which it is incorporated) (PET number, in applicable)	
4 2/14/97 5 Perpetual	.
(Date of meorporation)	
6. Upon Qualification	- 1,
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. 23 P Whites Path, South Yarmouth, MA 02664	. <u>* #1</u> 1 - 4
(Principal office address)	
Sq. Riverview Rd, Glastonbury, CT 06033	: Ţ 👾 👋 —
(Current mailing address)	
8 Mortunge Lending	
8. Mortung Lending (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	`
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	-
Name: Peter W, Gravelle C/0 GTI	
Office Address: 8051 North Tamiani Trail Box 14	
Sarasota Florida 34243	
(City) (Zip code)	

10. Registered agent's acceptance:

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

gistered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: leter W, Gravelle	
Address: 5613 Cape Leyte Dr	
Sarasota, FL 34242	
Vice Chairman:	
Address:	-
Address:	
Director: Jeffrey R. Lipes	
Director: Jetticy K. Lipes	• •
Address: 59 Riverview Rd	-
Glastonbury, CT 06033	·
Director:	
Address:	-
B. OFFICERS	
President: Dettrey K. Lipes	
Address: 59 Riverview Rd	-
<u>Clastonbury, CT 06033</u>	t
Vice President:	-
Address:	
	.0
Secretary:	
Address:	
Treasurer: Peter W. Gravelle Address: 5613 Cape Leyte Dr. Sarasota, FL 34242	
Address: 5613 Cape Leyte Dr. Sarasota, FL 34242	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
$\Lambda M (c) \rightarrow$	-
Solution of Director of Officer listed in number 12 of the application)	
14. Jefficy R. Lipes	•

(Typed or printed name and capacity of person signing application)

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The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

William Francis Galvin Secretary of the Commonwealth TO WHOM IT MAY CONCERN:

May 9, 2005

I hereby certify that according to the records of this office,

FAMILY CHOICE MORTGAGE CORPORATION

is a domestic corporation organized on February 14, 1997, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14,21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

In testimony of which,

I have hereunto affixed the Great Seal of the Commonwealth on the date first above written.

Juli

Secretary of the Commonwealth