

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000005877

**FILED**  
**Jun 18, 2007**  
**Secretary of State**

**Entity Name:** CITI FIRST MORTGAGE SERVICES CORPORATION

**Current Principal Place of Business:**

6855 JIMMY CARTER BLVD. SUITE 2400  
NORCROSS, GA 30071

**New Principal Place of Business:**

6075 ATLANTIC BLVD  
J2  
NORCROSS, GA 30071

**Current Mailing Address:**

6855 JIMMY CARTER BLVD. SUITE 2400  
NORCROSS, GA 30071

**New Mailing Address:**

6075 ATLANTIC BLVD  
J2  
NORCROSS, GA 30071

**FEI Number:** 20-2056405

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD. SUITE 101  
TALLAHASSEE, FL 323012960 US

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

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:** TERESE COULTHARD

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PC ( ) Delete  
Name: KIM, MICHAEL H  
Address: 6360 VIEWS TRACE DRIVE  
City-St-Zip: NORCROSS, GA 30092

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PC (X) Change ( ) Addition  
Name: KIM, MICHAEL H  
Address: 6075 ATLANTIC BLVD STE J2  
City-St-Zip: NORCROSS, GA 30071

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** MICHAEL KIM

PC

06/18/2007

Electronic Signature of Signing Officer or Director

Date