

F06000001071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

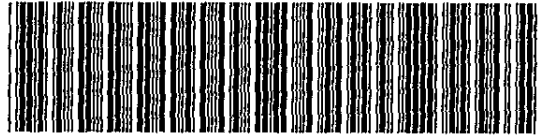
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

2/21/06  
SJA



## Regulatory Counsel Group, Inc.

Mortgage Licensing & Compliance Advisors

08 FEB 15 AM 9:20  
FILED  
www.regulatorycounsel.com  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 14, 2006

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle West  
Tallahassee, FL 32301  
(850) 245-6051

**RE: First Centennial Mortgage Corporation**

To Whom It May Concern:

This provides you with information on behalf of **First Centennial Mortgage Corporation** to establish them as a foreign company to transact business in your State. As their Agent, Regulatory Counsel Group, Inc. has enclosed the following:

1. A check in the amount of \$78.75 (\$70.00 filing fee and \$8.75 for Certificate of Status)
2. Two (2) original Applications for Authorization (signed)
3. Certificate of Good Standing (Original)
4. A self-addressed, stamped envelope to send one approved, original back to RCG's attention.

Please send all correspondence to:

Regulatory Counsel Group, Inc.  
295 West Crossville Road  
Suite 530  
Roswell, GA 30075

Thank you for your cooperation. If you have any questions, please contact me via phone at (770) 992-7779, via email at [llesser@rcgteam.com](mailto:llesser@rcgteam.com), or via fax at (770) 992-0779.

Sincerely,

Lisa A. Lesser  
Assistant Account Executive

Enclosures

**COVER LETTER**

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06 FEB 15 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** First Centennial Mortgage Corporation  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Emily Diehl  
(Name of Person)  
Regulatory Counsel Group, Inc.  
(Firm/Company)  
295 West Crossville Road, Suite 530  
(Address)  
Roswell, GA 30075  
(City/State and Zip code)

For further information concerning this matter, please call:

Emily Diehl at ( 770 ) 992-7779  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

**1. First Centennial Mortgage Corporation**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

N/A

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. Illinois**

(State or country under the law of which it is incorporated)

**3. 36-4176531**

(FEI number, if applicable)

**4. 7/11/1997**

(Date of incorporation)

**5. Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6. N/A**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 11 NORTH EDGELAWN DRIVE, AURORA, IL 60506-4362**

(Principal office address)

**11 NORTH EDGELAWN DRIVE, AURORA, IL 60506-4362**

(Current mailing address)

**8. Mortgage Broker / Correspondent Lender**

(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 NOT acceptable)**

Name: NRAI Services, Inc.

Office Address: 2731 Executive Park Dr., Suite 4

Westin

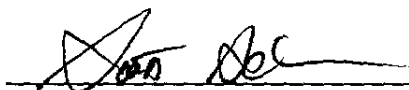
(City)

, Florida 33331

(Zip code)

**10. Registered agent's acceptance:**

*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.*



(Registered agent's signature) Scott Scher, Assistant Secretary of NRAI Services, Inc.

**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:**

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**A. DIRECTORS**

Chairman: N/A

Address: \_\_\_\_\_

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: N/A

Address: \_\_\_\_\_

Director: N/A

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

**B. OFFICERS**

President: Steven B. McCormick

Address: 11 NORTH EDGELAWN DRIVE, AURORA, IL 60506-4362

Vice President: Dave P. McCormick

Address: 11 NORTH EDGELAWN DRIVE, AURORA, IL 60506-4362

Secretary: Steven B. McCormick

Address: 11 NORTH EDGELAWN DRIVE, AURORA, IL 60506-4362

Treasurer: N/A

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Steven B. McCormick/President/Secretary

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