

F08000002257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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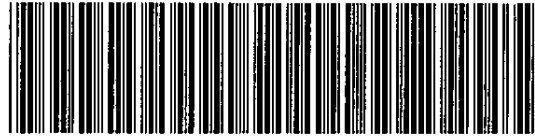
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/19/08--01026--022 **78.75

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2008 MAY 19 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/19/08

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Centennial Mortgage, Inc.

(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:

Matthew Kane

(Name of Person)

Centennial Mortgage, Inc.

(Firm/Company)

112 W. Jefferson Blvd., Suite 401

(Address)

South Bend, IN 46601

(City/State and Zip code)

For further information concerning this matter, please call:

Jennifer L. Heckaman

(Name of Person)

at (574) 233-6773

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

New Filing 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. Centennial Mortgage, Inc.

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

Centennial Mortgage, Inc. of Missouri

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

2. Missouri

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

3. 43-1055237

(FEI number, if applicable)

4. 7/31/75

(Date of incorporation)

5. perpetual

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

6. March 2008

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

7. 112 W. Jefferson Blvd., Suite 401, South Bend, IN 46601

(Principal office address)

(Current mailing address)

8. Centennial Mortgage, Inc.'s underwriter lives and works in Florida.

(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 Drive, Suite 4

Weston

(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.

By: Xonda Diwen, Asst Secretary

(Registered agent's signature)

Xonda Diwen, Assistant Secretary

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.

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Matthew Kane

Address: 112 W. Jefferson Blvd., Suite 401

South Bend, IN 46601

Director: _____

Address: _____

B. OFFICERS

President: Matthew Kane

Address: 112 W. Jefferson Blvd., Suite 401

South Bend, IN 46601

Vice President: _____

Address: _____

Secretary: Jennifer L. Heckaman

Address: 112 W. Jefferson Blvd., Suite 401, South Bend, IN 46601

Treasurer: _____

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. Matthew Kane, President

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

STATE OF MISSOURI



Robin Carnahan
Secretary of State

**CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING**

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

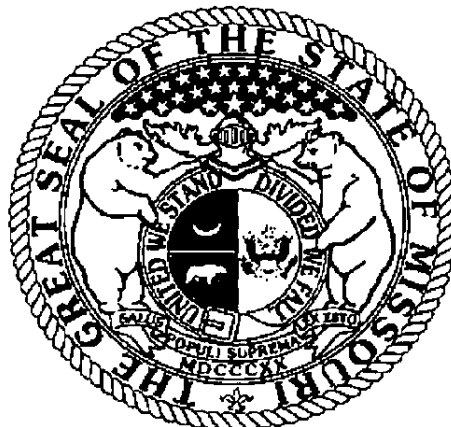
**CENTENNIAL MORTGAGE, INC.
00177708**

was created under the laws of this State on the 31st day of July, 1975, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 7th day of April, 2008

Robin Carnahan

Secretary of State



Missouri Secretary of State, Robin Carnahan

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- ☐ Check My Orders
- ☐ Maintain My Profile
- ☐ Manage My Reps
- ☐ Security Policy
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Current Status:

Processing Complete: Transaction
Approved, Filing Complete (751827)

Transaction Approved, Filing Complete

Date: 4/7/2008 1:50:43 PM

Invoice Number: 6892643

[Click Here to Print Certificate](#)