95000004125

906 Olive Street St. Louis, MO 63101. March 14, 1997

Tel 314 231 8380 Fax 314 231 6454

Secretary of State Corporate Records Bureau Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

800002115978----03/18/97--01041--020 *****35.00 *****35.00

Re:

JOSEPH C. SANSONE COMPANY

Formerly: PROPERTY TAX RESEARCH COMPANY (Missouri Domestic) Order #: 750544

Counsel:

Vicky Belgeri

Property Tax Research Company

15450 South Outer Forty Rd., Ste 270

Chesterfield, MO 63017

Gentlemen:

As requested by counsel, we enclose for filing Application for Amended Certificate of Authority on behalf of this corporation, together with funds in payment of the required fees.

Evidence of the filing should be returned to this office by regular mail.

If you have any questions or if for any reason the filing cannot be effected promptly, please notify this office of the details by calling our toll-free number: 1-800-325-2671.

Very truly yours,

Cathi J. Wall

Associate Customer Specialist

CJW

Enclosure

Special Instructions: None

APPLICATION BY FOREIGN CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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	FILED 17 PM 1ARY OF ASSEE, F
SECTION I (1-3 must be completed)	2: 3 STAT
PROPERTY TAX RESEARCH COMPANY Name of corporation as it appears within the records of the	Στ: ω
2. Incorporated under laws of: Missouri	
3. Date authorized to do business in Florida: August 24, 1995	
SECTION II (4-7 complete only the applicable changes	s)
4. If the amendment changes the name of the corporation, effected under the laws of its jurisdiction of incorporation?	when was the change
January 24, 1997	
5. Name of corporation after the amendment, adding suffix "corcorporated," or appropriate abbreviation, if not contained in new	poration," "company," "in- name of the corporation
JOSEPH C. SANSONE COMPANY	
6. If the amendment changes the period of duration, indicate new	v period of duration.
7. If the amendment changes the jurisdiction of incorporation, inc	dicate new jurisdiction.
March U	, 1997
Signature Name and Title	Date

Joseph C. Sansone, President

6,54



Rebecca McDowell Cook Secretary of State

I, REBECCA MCDOWELL COOK, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody as Secretary of State show that

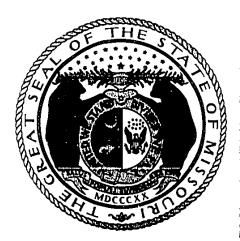
JOSEPH C. SANSONE COMPANY (Originally: PROPERTY TAX RESEARCH COMPANY)

was incorporated under the Laws of the State of Missouri on the 18^{th} day of November, 1994.

I further certify that on the 24th day of January, 1997, an Amendment was filed in this office changing the name of PROPERTY TAX RESEARCH COMPANY to JOSEPH C. SANSONE COMPANY.

In testimony whereof, I have set my hand and imprinted the Great Seal of the State of Missouri, on this, the 30'h day of January, 1997.

Secretary of State



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S. C. S. C.

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#F95000004767 OFFICE OF FLORIDAN OFFICE OF THE COMPTROLLER APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section ______*, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: BROOKSAMERICA MORTGAGE CORPORATION EIN or SS#: 95-4037912
Address: 6 HUTTON CENTRE DRIVE, STE. 1020
SANTA ANA, CA 92707
8 103.75 SCC
Amount: \$165.00 Date Paid 02/10/97
Reason for claim: OVERPAYMENT OF AMENDED ANNUAL REPORT (F95000004767)
SCC/REIN 03/04/97
Certified true and correct this 10th day of Narch, 19 97.
Signature Jean Stub Yakel Via President
* Must be completed if authority is other than Section 215.26, Florida Statutes.
Salation 215,23, North State of the State of
Professional Security Company Const. Accession of the Company of t
For Agency Use Only Agency recommends approval of above claim and submits the following information to
substantiate the claim: Amount of recommended refund \$ 103.75
The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on
State Treasurer's Receipt No. 91634-030 dated 02/10/97
Name of Account 45 20 21 30 00 14 5 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Statutory Authority for Collection 617
It is requested that payment be made from the following account:
NAME OF ACCOUNT:
4520213000145300000022002000
Certified true and correct this day of the control
Department of State, Division of Corporations (Authorized Signature and Title)
(Agency) (Authorized Signature and Title)