

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT 29 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000008681580

10/29/02--01154--004 **150.00



DOCUMENT # F96000005349

1. Corporation Name

FRIEDMAN, BILLINGS, RAMSEY & CO., INC.

Principal Place of Business

POTOMAC TOWER, 18TH FL. 1001 19TH ST. N.
ARLINGTON VA 22209
US

Mailing Address

POTOMAC TOWER, 18TH FL. 1001 19TH ST. N.
ARLINGTON VA 22209
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/15/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

52-1630477

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
C	FRIEDMAN, EMANUEL J	POTOMAC TOWER, 18TH FL, 1001 19T	ARLINGTON VA 22209
VC	BILLINGS, ERIC F	POTOMAC TOWER, 18TH FL, 1001 19T	ARLINGTON VA 22209
PSD	RAMSEY, W. RUSSELL	POTOMAC TOWER, 18TH FL, 1001 19T	ARLINGTON VA 22209
T	HARRINGTON, KURT R	POTOMAC TOWER, 18TH FL, 1001 19T	ARLINGTON VA 22209
C	SMITH, ROBERT S	POTOMAC TOWER, 18TH FL, 1001 19	ARLINGTON VA 22209

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

CR2E040 (8/02)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Judith B. Argao

Judith B. Argao
Asst. Secretary & V. President

REGISTERED AGENT MUST SIGN

Date

10/25/02

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/25/02

Daytime Phone #

703/312-9744



FRIEDMAN, BILLINGS, RAMSEY & CO. INC.

*Institutional Brokerage
Research
Investment Banking*

Potomac Tower
1001 Nineteenth Street North
Arlington, Virginia 22209
Telephone (703) 312-9500

October 25, 2002

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

To Whom It May Concern:

On behalf of Friedman, Billings, Ramsey & Co., Inc., enclosed is a completed application for reinstatement and the appropriate fee of \$150.00. As we informed your office by phone today, we did not receive the two prior notices. In the future, we would request that all correspondence be sent to the attention of Nicholas J. Nichols, Director of Compliance/E.V.P. so that we may respond promptly.

If you have any questions, please contact me at (703) 312-9554.

Sincerely,

Nicholas J. Nichols
Director of Compliance
Executive Vice President