

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # F97000000323**

1. Corporation Name

**SEARCH FINANCIAL SERVICES OF FLORIDA, INC.**

Principal Place of Business

Mailing Address

700 N. PEARL ST., STE. 400  
DALLAS TX 75201

700 N. PEARL ST., STE. 400  
DALLAS TX 75201

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

2. New Principal Office Address, If Applicable

600 North Pearl Street

Suite, Apt. #, etc.

Suite 2500

City & State

Dallas, TX

Zip

75201

Country

USA

3. New Mailing Office Address, If Applicable

600 North Pearl Street

Suite, Apt. #, etc.

Suite 2500

City & State

Dallas, TX

Zip

75201

Country

USA

**REINSTATEMENT 98**

4. Date Incorporated or Qualified  
To Do Business in Florida

01/21/1997

5. FEI Number

75-2678806

Applied For

Not Applicable

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DCFO D. P. CFO	IDZI, ROBERT D	700 N. PEARL ST., STE. 400 600 N. Pearl Street, Suite 2500	DALLAS TX 75201
P	DELLAVECHIA, ANTHONY J	700 N. PEARL ST., STE. 400	DALLAS TX 75201
VS	REGENBOGEN, ELLIS A	700 N. PEARL ST., STE. 400 600 N. Pearl Street, Suite 2500	DALLAS TX 75201
VP, Ass. Sec.	Carolyn J. Malone	600 N. Pearl Street, Suite 2500	Dallas, TX 75201
			4000002724134--4 -12/29/98--01003--009 ****7500 ****750.00 11/19/98

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE FL 32301

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

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.

Signature of  
Registered Agent

**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date 12/1/98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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

11/19/98

214/915-6002  
Date Daytime Phone #

CR2E040 (9/98)