

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JUL 13 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-07

CR2E081 (1/07)

DOCUMENT # F 98000006878

1. Corporation Name

Pioneer Mortgage Inc.

2. Principal Office Address - No P.O. Box #

8618 E. Gospel Island Road

3. Mailing Office Address

P.O. Box 2444

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Inverness, FL

City & State

Gig Harbor, WA

Zip

34450

Country

Citrus

Zip

98335

Country

Pierce

4. Date Incorporated or Qualified
To Do Business in Florida

1998

5. FEI Number

91-1070938

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Robert Carlson

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

8618 E. Gospel Island Road Lot 35A

Suite, Apt. #, Etc.

City

Inverness

State

FL

Zip Code

34450

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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06/26/07--01025--016 **1350.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Robert Carlson

REGISTERED AGENT MUST SIGN

Date

6-22-07

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Robert Carlson	8618 E. Gospel Island Road	Inverness, FL 34450
VP	Robert Carlson	8618 E. Gospel Island Road	Inverness, FL 34450
S	Robert Carlson	8618 E. Gospel Island Road	Inverness, FL 34450
T	Robert Carlson	8618 E. Gospel Island Road	Inverness, FL 34450
D	Robert Carlson	8618 E. Gospel Island Road	Inverness, FL 34450

10. 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 contained in Chapter 119, 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:

Robert Carlson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6-22-07

Daytime Phone #

(253) 370-3700