

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVE
AND
FILED

01 NOV -9 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F99000004945

1. Corporation Name

PAWNMART, INC.

Principal Place of Business

Mailing Address

~~6800 RIDGLEA PLACE, SUITE 724~~
~~FORT WORTH TX 76116~~

~~6800 RIDGLEA PLACE, SUITE 724~~
~~FORT WORTH TX 76116~~

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

2. New Principal Office Address, If Applicable

2175 OLD CONCORD RD

Suite, Apt. #, etc.

SUITE 200

City & State

SMYRNA GA

Zip

30080

Country

USA

3. New Mailing Office Address, If Applicable

2175 OLD CONCORD RD

Suite, Apt. #, etc.

SUITE 200

City & State

SMYRNA GA

Zip

30080

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/20/1999

5. FEI Number

75-2520896

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City/State/Zip
CEO	THOMPSON, CARSON R	1801 SANGUINET STREET	FORT WORTH TX 76179
CEO	JOHN BONDREAN	16210 SPRUNG CREEK	DALLAS TX 75248
P	REGARD, MIKE	3905 W. 4TH STREET	FORT WORTH TX 76107
CFO	ROBERT SCHLEIZER	1532 W PLEASANT RUN	DESOTO TX 75115
VP	HADEN, RANDY	239 HIGH POINTE LANE	CEDAR HILL TX 75104
SVCF	WHITE, THOMAS	239 HIGH POINTE LANE	CEDAR HILL TX 75104
COO	ROGER HOGAN	625 BRIDLE CREEK DR	BETHLEHEM GA 30044
S	ISBELL, RICK R	2172 GREEN HILL CIRCLE	FORT WORTH TX 76112
D	BERK, JAMES	5825 OBERLIN, SUITE 100	SAN DIEGO CA 92121

8. Name and Address of Current Registered Agent

~~POLK, ADRIAN~~
~~7103 NW 77TH STREET~~
~~TAMARAC FL 33321~~

9. Name and Address of New Registered Agent

Name

CHRIS HOWELL

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

1802 WEST FAIRFIELD DRIVE

Suite, Apt. #, Etc.

City

PENSACOLA

State

FL

Zip Code

32505

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]

REGISTERED AGENT MUST SIGN

Date 10-31-01

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/01)