

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 AUG 14 PM 12:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P00000087956

1. Corporation Name

Success mortgage Company

2. Principal Office Address

1023 N. Tyndall PKWY

Suite, Apt. #, etc.

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

Panama City, FL

City & State

Zip

32404

Country

Bay

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

September 15, 2000

5. FEI Number

59-3678974

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

Diane Zimmerman

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

1023 N. TYNDALL PKWY

Suite, Apt. #, Etc.

City

PANAMA City, FL 32404

State
FL

Zip Code

100022313621

08/14/03--01034--006 **1050.00

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

Diane M. Zimmerman

REGISTERED AGENT MUST SIGN

Date

8-11-03

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
Sole OFFICER	DIANE M. ZIMMERMAN	1023 N. TYNDALL PKWY	PANAMA City, FL 32404

REINSTATEMENT 01-03

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 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:

Diane M. Zimmerman
DIANE M. ZIMMERMAN

8-11-03

Date

850-785-4671

Daytime Phone #

CR2001 (10/02)