

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
02 NOV 20 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P0000099271

1. Corporation Name

~~Apple Mortgage of SW FL, Inc.~~

400008685504
10/30/02--01010--003 **940.00

2. Principal Office Address

10662 Vanderbilt Dr.

Suite, Apt. #, etc.

3. Mailing Office Address

10662 Vanderbilt Dr.

Suite, Apt. #, etc.

City & State

Naples, FL

Zip

34108

Country

USA

City & State

Naples, FL

Zip

34108

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

10-20-02

5. FEI Number

65-1053802

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

John E. Fothergill Jr.

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

10662 Vanderbilt Dr.

Suite, Apt. #, Etc.

City

Naples

State

FL

Zip Code

34108

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

John E. Fothergill Jr.
REGISTERED AGENT MUST SIGN

Date

10/19/02

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/S/D	John E. Fothergill Jr.	10662 Vanderbilt Dr.	Naples, FL 34108

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:

John E. Fothergill Jr. - John E. Fothergill Jr.

Date

Daytime Phone #

10/19/02 239-594-8037

CR2E081 (9/01)

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