

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



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

FILED

02 DEC 11 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000011315

1. Corporation Name

Patriot Mortgage Co., Inc.

2. Principal Office Address

1025 S. Semoran Blvd.

3. Mailing Office Address

1025 S. Semoran Blvd.

Suite, Apt. #, etc.

1093

Suite, Apt. #, etc.

1093

City & State

Winter Park

City & State

Winter Park

Zip

Florida

Country

USA

Zip

Florida

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/29/01

5. FEI Number

59-3695653

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

Richard Cerbasi

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

1025 S. Semoran Blvd.

Suite, Apt. #, Etc.

1093

City

Winter Park

State

FL

Zip Code

32792

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

REGISTERED AGENT MUST SIGN

Date 12/06/02

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	Richard Cerbasi	2343 Hedgegate Ct.	Orlando, Fl. 32828

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/06/02

Date

407-679-8585

Daytime Phone #

Dept. of State
Division of Corporations

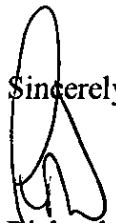
Friday, December 06, 2002

To Whom It May Concern:

Please take into consideration, upon receipt of this application for reinstatement, the fact that I never received the 1st or 2nd notice for the filing of this report. The address that you have on file for Patriot Mortgage Company, Inc. is incorrect at this time. I have provided the corrected address on the Corporation Reinstatement Form.

I have enclosed the necessary \$150.00, without the penalty fees, as instructed by your office. If you have any questions, please call me at your convenience.

Sincerely,



Richard Cerbasi
President
Patriot Mortgage Company, Inc.
1025 S. Semoran Blvd.
Suite 1093
Winter Park, Fl. 32792

407-679-8585