

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000094249

1. Corporation Name

HOMETEK MORTGAGE GROUP, INC.

\$150.00

FILED

03 OCT 31 AM 9:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

452 OSCEOLA ST. STE 107  
ALTAMONTE SPRINGS FL 32701

Mailing Address

452 OSCEOLA ST. STE 107  
ALTAMONTE SPRINGS FL 32701



REINSTATEMENT

53

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

08/29/2002

Suite, Apt. #, etc.

407 CENTERPOINTE CR. #1619

Suite, Apt. #, etc.

871 Royalwood Ln.

City & State

Altamonte Springs, FL

City & State

Oviedo, FL

Zip

32701

Country

USA

Zip

32765

Country

USA

5. FEI Number

45-0494738

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)  
1

Name of Officers  
and/or Directors  
2

Street Address of Each  
Officer and/or Director  
3

City / State / Zip  
4

P

FORTNA, STEPHEN W

505 VIA DELL ORO DR #204

ALTAMONTE SPRINGS FL 32714

871 Royalwood Ln  
Oviedo FL 32765

Oviedo FL 32765

100024335471  
10/31/03--01068--019 \*\*158.75

8. Name and Address of Current Registered Agent

FORTNA, STEPHEN W  
505 VIA DELL ORO DR #204  
ALTAMONTE SPRINGS FL 32714

9. Name and Address of New Registered Agent

Name

STEVE W. FORTNA

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

871 Royalwood Ln

Suite, Apt. #, Etc.

City

Oviedo

State

FL

Zip Code

32765

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Steve Fortna*  
SIGNATURE REQUIRED

Date 10/28/03

REGISTERED AGENT MUST SIGN

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:

*Steve Fortna*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/28/03

Daytime Phone #

(321)  
436-7939

CR20040 (7/03)

October 28, 2003

Florida Department of State  
Division of Corporations  
Tallahassee, FL 32314

Hometek Mortgage Group Inc.  
407 Centerpointe Circle #1619  
Altamonte Springs, FL 32701

Re: Reinstatement of corporation

To Whom It May Concern:

The intent of this letter is to notify the state that we did not receive your request to file an annual report until after the deadline. This was due to the fact that we changed our address. Also this is our first year, we were not knowledgeable of this matter of procedure until now.

We have enclosed a check in the amount of \$150.00 for reinstatement of the corporation. Hopefully we can have the late fees waived after review of our situation.

Respectfully,



Steve Fortna  
Hometek Mortgage Group Inc.